VISTA

INPATIENT MEDICATIONS (IM)

PHARMACIST USER MANUAL

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Department of Veterans Affairs
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Office of Chief Information Officer

Pharmacist Manual

Table of Contents

Since the documentation is topic oriented and the screen options are not, a Menu Tree is provided below for the newer users who may need help finding the explanations to the options. The IV Menu appears the same as in the software.

Menu Tree

Introduction

The Inpatient Medications package is part of the Computerized Patient Record System (CPRS). It provides a method of management, dispensing, and administration of inpatient drugs within the hospital. Inpatient Medications combines clinical and patient information that allows each medical center to enter orders for patient, dispense meditations by means of Pick Lists, print labels, create Medication Administration Records (MARs), and create Management Reports.

List Manager

You have probably noticed that when you process an order, the screen has dramatically changed from the previous version. The new screen was designed using List Manager.

This new screen will give you

- more pertinent information

- easier accessibility to vital other reports and areas of a patient's chart you may wish to see.

Please take the time to read over the explanation of the screen and the actions that you can now execute at the touch of a button. This type of preparation before attempting to use List Manager has been proven effective in saving time and effort.

Inpatient List Manager

Allergy Indicator

Screen Title

```
Patient Information           Mar 21, 1997 10:57:02        Page:    1 of    1
DOE,JOHN                      Ward: NHCU-33                        <A>
  PID: 111-11-1414            Room-Bed: NORTH      Ht(cm): _____ (_____)
  DOB: 06/06/25 (71)                               Wt(kg): 77.59 (07/16/96)
  Sex: MALE                                      Admitted: 02/17/97
   Dx: COPD                              Last transferred: ********

Allergies - Verified: NEOSPORIN, PENICILLIN
          Non-Verified: DEMEROL HYDROCHLORIDE

   Adverse Reactions:
 Inpatient Narrative: This is a test of the Inpatient Narrative
Outpatient Narrative:




          Enter ?? for more actions
PU Patient Record Update   NO New Order Entry        IN Intervention Menu
DA Detailed ADR List       VP View Profile
Select Action: View Profile//
```

Header Area

List Area (scrolling region)

Message Window

Action Area

Screen Title: The screen title changes according to what type of information List Manager is displaying (e.g., Patient Information, Non-Verified Order, Inpatient Order Entry, etc).

Allergy Indicator: This indicator will display when allergy information has been entered for the patient.

Header Area: The header area is a "fixed" (non-scrollable) area that displays demographic information for a patient.

List Area: (scrolling region): This is the section that will scroll (like the previous version) and display the information that an action can be taken on.

Message Window: This section displays a plus (+) sign, minus (-) sign, if the list is longer than one screen, and informational text (i.e., Enter ?? for more actions). If you enter the plus sign at the action prompt, List Manager will "jump" forward to the next screen. If there is a minus sign displayed and you enter one at the action prompt, List Manager will "jump" back to the previous screen. The plus and minus signs are only valid actions if they are displayed in the message window.

Action Area: The list of valid actions display in this area of the screen. If you enter a double question mark (??) at the "Select Action" prompt, you will receive a "hidden" list of additional actions that are available to you.

Using List Manager

List Manager is a tool designed so that a list of items can be presented to the user for an action.

For Inpatient Pharmacy, the List Manager does the following:

- gives capability to browse through a list of orders.

- gives capability to take action(s) against those items.

- gives capability to print MARs, labels, and profiles from within the *Inpatient Order Entry* option.

- gives the user the capability to select a different option than the option they are in.

Hidden Actions

You may enter a double question mark (??) at the "Select Action" prompt for a list of all actions available. Typing the name(s) or synonym(s) at the "Select Action" prompt enters actions.

The following is a list of generic List Manager actions with a brief description. The synonym for each action is shown in brackets following the action name. Entering the synonym is the quickest way to select an action.

<u>Action</u>	<u>Description</u>
Next Screen [+]	move to the next screen
Previous Screen [-]	move to the previous screen
Up a Line [UP]	move up one line
Down a line [DN]	move down one line
First Screen [FS]	move to the first screen
Last Screen [LS]	move to the last screen
Go to Page [GO]	move to any selected page in the list

Re Display Screen [RD]   redisplay the current screen

Print Screen [PS]   prints the header and the portion of
                                          the list currently displayed

Print List [PL]   prints the list of entries currently
                                          displayed

Search List [SL]   finds selected text in list of entries

Quit [Q]   exits the screen

Auto Display (On/Off) [ADPL]   toggles the menu of actions to be
                                          displayed/not displayed automatically

Shift View to Right [>]   Shifts the view on the screen to the
                                          right

Shift View to Left [<]   Shifts the view on the screen to the
                                          left

The following is a list of Inpatient Medications specific hidden actions with a brief description. The synonym for each action is shown in brackets following the action name. Entering the synonym is the quickest way to select an action.

MAR Menu [MAR]   takes you to the MAR Menu
    24 Hour MAR [24]   will show the 24 Hour MAR
    7 Day MAR [7]   will show the 7 Day MAR
    14 Day MAR [14]   will show the 14 Day MAR
    Medications Due   will show the Worksheet
    Worksheet [MD]

Label Print/Reprint [LBL]   Takes you to the Label Print/Reprint
                                          Menu
    Align Labels (Unit Dose) [ALUD]   Allows you to align the MAR label
                                          stock on a printer
    Label Print/Reprint [LPUD]   Allows you to print or reprint a MAR
                                          label
    Align Labels (IV) [ALIV]   Allows you to align the IV bag label
                                          stock on a printer
    Individual Labels (IV) [ILIV]   Allows you to print or reprint an IV
                                          bag label
    Scheduled Labels (IV) [SLIV]   Allows you to print the scheduled IV
                                          bag label
    Reprint Scheduled Labels (IV)   Allows you to reprint scheduled IV bag
    [RSIV]   labels

Other Pharmacy Options [OTH]	Takes you to more pharmacy options
Pick List Menu [PIC]	Takes you to the Pick List Menu
Enter Units Dispensed [EN]	Allows you to enter the units actually Dispensed for a Unit Dose order
Extra Units Dispensed [EX]	Allows you to enter extra units dispensed for a Unit Dose order
Pick List [PL]	
Report Returns [RRS]	Allows you to enter units returned for a Unit Dose order
Reprint Pick List [RPL]	Allows you to reprint a pick list
Send Pick list to ATC [SND]	Allows you to send a pick list to the ATC
Update Pick List [UP]	Allows you to update a pick list
Returns/Destroyed Menu [RET]	Takes you to the Returns/Destroyed options
Report Returns (UD) [RR]	Allows you to enter units returned for a Unit Dose order
Returns/Destroyed Entry (IV) [RD]	Allows you to enter units returned or destroyed for an order
Patient Profiles [PRO]	Takes you to the patient profile menu
Inpatient Medications Profile [IP]	Allows you to generate an Inpatient Profile for a patient
IV Medications Profile [IV]	Allows you to generate an IV Profile for a patient
Unit Dose Medications Profile [UD]	Allows you to generate a Unit Dose profile for a patient
Outpatient Prescriptions [OP]	Allows you to generate an Outpatient profile for a patient
Action Profile #1 [AP1]	Allows you to generate an Action Profile #1
Action Profile #2 [AP2]	Allows you to generate an Action Profile #2
Patient Profile (Extended) [EX]	Allows you to generate an Extended Patient Profile

The following actions are available when selecting an order for processing.

Speed Discontinue [DC]	will be able to speed discontinue
Speed Renew [RN]	will be able to speed renew
Speed Finish [SF]	will be able to speed finish

Speed Verify [SV]   will be able to speed verify

The following action is available when selecting an order that is a Non-Verified Pending order.

Jump to a Patient [JP]   will take you to another patient

Order Processing

Within the Inpatient Medications package there are three different paths that you can take to enter a new order or take action on an existing order. They are (1) Order Entry (UD), (2) Non-Verified/Pending Orders, (3) Inpatient Order Entry/Order Entry (UD). Each of these paths differs by the prompts that you will be asked. Once you have reached the point of entering a new order or selecting an existing order, the process becomes the same for each path. Below is a summary of the different paths.

Order Entry (UD)
[PSJU NE]

Inpatient Order Entry allows the nurse to create, edit, renew, hold, and discontinue **Unit Dose** while remaining in the Unit Dose module.

When you access the *Inpatient Order Entry* option from the Unit Dose module for the first time within a session, you are first asked to select the IV room in which you wish to enter orders. You are then given the label and report devices defined for the IV room you choose. If no devices have been defined, you will be given the opportunity to choose them. If you exit this option and re-enter within the same session, you are shown your current label and report devices.

Non-Verified/Pending Orders
[PSJU VBW]

This option allows easy identification and processing of non-verified and/or pending orders. This option will also show pending and pending renewal orders, which are orders from CPRS (Computerized Patient Record System) that have not been finished by Pharmacy Service.

You can choose to look at non-verified and/or pending orders for a ward group (**G**), ward (**W**), or single patient (**P**). If ward or ward groups is selected, patients will be listed by wards and then by teams.

If **no** profile is chosen, the orders for the patient selected will be displayed for verification or completion by login date with the earliest date showing first. If a profile is chosen, the orders will be selected from this list for processing (any order may be selected).

IOE Inpatient Order Entry/Order Entry (UD)
[PSJ OE]

Inpatient Order Entry allows the pharmacist to create, edit, renew, hold, and discontinue **Unit Dose** and **IV orders**, as well as put existing IV orders on call for any patient, while remaining in the Unit Dose module.

When you access the *Inpatient Order Entry* option from the Unit Dose module for the first time within a session, you are first asked to select the IV room in which you wish to enter orders. You are then given the label and report devices defined for the IV room you choose. If no devices have been defined, you will be given the opportunity to choose them. If you exit this option and re-enter within the same session, you are shown your current label and report devices.

Order Entry (UD) functions are almost identically to Inpatient Order Entry but does not include IV orders on the profile and only Unit Dose order may be entered or processed.

Name of the patient

The Patient Information List is then displayed for the selected patient. This list contains the patient's demographic data, Allergy/Adverse Reaction data, and Pharmacy Narratives.

- **Patient Demographics**
The patient's demographic information is displayed in the heading of the List Manager display, and includes information about the patient's current admission.

```
Patient Information          Jun 28, 1995 09:15:58      Page:    1 of    1
FIFE,BARNEY                        Ward: 1 EAST
   PID: 123-14-1960          Room-Bed: 244-B        Ht(cm): _____ (_____)
   DOB: 12/14/60 (35)                               Wt(kg): _____ (_____)
   Sex: MALE                                     Admitted: 01/18/95
    Dx: GUN SHOT WOUND                     Last transferred:
```

- **Allergy/ADR Information**
This includes non-verified and verified Allergy/ADR information as defined in the Allergy package. The allergy data is sorted by type (DRUG, OTHER, FOOD). If no data is found for a category, the heading for that category is not displayed.

- **Pharmacy Narratives**

A new INPATIENT NARRATIVE field (#5) has been added in Version 5.0. This field is similar to the OUTPATIENT NARRATIVE (#5), and may be used by inpatient pharmacy staff to display information specific to the current admission for the patient. Data in this field is automatically deleted when the patient is admitted.

```
Allergies: - Verified:
      Non - Verified:

    Adverse Reactions:
  Inpatient Narrative:
 Outpatient Narrative:
```

- **Other Actions that can be taken.**

```
            Enter ?? for more actions
PU Patient Record Update            NO New Order Entry
DA Detailed ADR List                IN Intervention Menu
VP View Profile
Select Action: View Profile//
```

Below are the primary actions available from the Patient Information list:

- **PU Patient Record Update**

Allows editing of the Inpatient Narrative and the Patient's Default Stop Date for Unit Dose Order entry.

- **DA Detailed Allergy/ADR List**

Displays a detailed listing of the selected item from the patient's Allergy/ADR List. Entry to the *Edit Allergy/ADR Data* option is provided with this list also.

  - **EA Enter/Edit Allergy/ADR Data**
    Provides access to the Adverse Reaction Tracking (ART) package to allow entry and/or edit of allergy adverse reaction data for the patient. See the Allergy package documentation for more information on Allergy/ADR processing.

  - **SA Select Allergy**
    Allows the user to select a specific allergy to view.

- **VP View Profile**

Allows selection of a Long, Short, or NO profile for the patient. The profile displayed in the *Inpatient Order Entry* and *Non-Verified/Pending Orders* options will include IV and Unit Dose orders.

- **NO New Order Entry**

Allows new Unit Dose and IV orders to be entered for the patient.

- **IN Intervention Menu**

Allows entry of new interventions or edit, delete, view, or printing of an existing intervention.

- **NE Enter Pharmacy Intervention:** This option is used to enter an entry into the APSP INTERVENTION file (#9009032.4).

- **ED Edit Pharmacy Intervention:** This option is used to edit an already existing entry in the Intervention file (#9009032.4).

- **PRT Print Pharmacy Intervention:** This option is used to obtain a captioned printout of Pharmacy Interventions for a certain date range. It will print out on normal width paper and can be queued to print at a later time.

- **DEL Delete Pharmacy Intervention:** This option is used to delete an intervention from the APSP INTERVENTION file (#9009032.4). You may only delete an intervention that was entered on the current day.

- **VW View Pharmacy Intervention:** This option is used to display Pharmacy Interventions in a captioned format.

PAtient Profile (Unit Dose)
[PSJU PR]

- **Patient Demographics**

The patient's demographic information is displayed in the heading of the List Manager display, and includes information about the patient's current admission.

```
NIVEK,EPSILON                    Ward: 2B                              <A>
   PID: 523-23-4723         Room-Bed:              Ht(cm): _____ (_____)
   DOB: 10/23/27 (70)                              Wt(kg): _____ (_____)
   Sex: ____                                     Admitted: 12/08/97
    Dx: THIS IS THE ONE.            Last transferred: ********
```

- **Patient Profile List:** contains all orders for a selected profile type.

```
- - - - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - - -
  1 -> ASPIRIN SUPP,RTL                         C  12/15  01/14  A
          Give: 15MG PO MO-WE-FR
  2 -> ASPIRIN SUPP,RTL                         C  01/09  02/08  A
          Give: 325MG PO QD
  3    PREDNISOLONE SOLN,OPH                     C  01/09  02/08  A
          Give: 325MG PO QD
  4 -> METHYLPREDNISOLONE INJ,SUSP              O  12/19  12/19  E
          Give: 60MG IV ONCE
  5 -> LORAZEPAM INJ                            P  01/05  01/15  A
          Give: 10CC IM Q12H
- - - - - - - - - - - - - - - N O N - V E R I F I E D - - - - - - - - - - - - - -
```

The orders on the profile are sorted first by the status of ACTIVE, NON-VERIFIED, PENDING, PENDING RENEWALS, and then alphabetically by SCHEDULE TYPE. Pending orders with a priority of STAT are listed first and are displayed in a bold and blinking text for easy identification. After SCHEDULE TYPE, orders are sorted alphabetically by DRUG (the drug name listed on the profile), and then in descending order by START DATE.

If a Unit Dose order not yet verified by pharmacy has been verified by nursing, it will be listed under the ACTIVE heading with a -> next to its number identifying it as non-verified. Orders may be selected by choosing the Select Order action, or directly from the profile using the order number displayed to the left of the drug. Multiple orders may be chosen by entering the numbers of each order to be included separated by commas (e.g., 1,2,3), or a range of numbers using the dash (e.g., 1-3).

> **Note:** The START DATE and DRUG sort may be reversed using the INPATIENT PROFILE ORDER SORT field in the INPATIENT USER PARAMETERS file (#53.45).

- **actions that can be taken**

```
+            Enter ?? for more actions
PI  Patient Information              SO  Select Order
PU  Patient Record Update            NO  New Order Entry
Select Action: Next Screen//
```

Below are the primary actions available in the Patient Profile list:

- **PI Patient Information**
The Patient Information List is then display for the selected patient. This list contains the patient's demographic data, Allergy/Adverse Reaction data, and Pharmacy Narrative.

- **PU Patient Update**

Allows editing of the Inpatient Narrative and the patient's Default Stop Date for Unit Dose Order entry.

- **SO Select Order**

Allows selection of the orders to be processed. Multiple orders may be chosen by entering the numbers of each order to be included separated by commas (e.g., 1,2,3), or a range of numbers using the dash (e.g., 1-3).

- **NO New Order Entry**

Allows new unit Dose and IV orders to be entered for the patient.

Unit Dose Order View List

After the patient is selected and length of profile is chosen, order entry follows three basic steps:

1. Take action on a previously entered order by selecting it from the profile *or* create a new order by entering the drug, schedule, administration times, etc., pertaining to the type of order.

2. If Auto-Verify is disabled, the order must be verified before it is included on the Pick List, MAR, etc. For more information on the Auto-Verify function see the Edit User Parameters section of the *Pharmacy Supervisor Manual.*

3. If orders have been verified, you must provide information for the *Pre-Exchange Units Report.* After verifying an order, you are prompted to identify the number of units required before the next cart exchange (pre-exchange units). Information will be requested for each order that has been verified. When you finish entering new orders, a *Pre-Exchange Report* will be printed. The report lists patient name, ward location, room and bed, orderable item, dispense drug, and pre-exchange needs for each order. You can immediately print this report to the screen or queue it to print on a printer. We advise that you print a copy on the printer. Once you exit this option, you cannot reprint this report.

Patient Demographics/Allergy/ADR Data

```
ABC,PATIENT                        Ward: 1 EAST              <A>
   PID: 123-14-1960        Room-Bed: 244-C       Ht(cm): _____  (_____)
   DOB: 12/14/60 (35)                            Wt(kg): _____  (_____)
   Sex: MALE                                   Admitted: 10/08/97
    Dx: OBSERVATION                      Last transferred: 10/03/97
```

This includes a condensed listing of the patient's demographic and location information. If the patient has Allergy/ADR data defined, an "<A>" is displayed to the right of the ward location to alert the user of the existence of this information

☞   (**Note:** This data may be displayed using the Detailed Allergy/ADR List action from this list's hidden menu). The status and type of order are displayed in the top left corner of the heading, and will include the priority (if defined) for pending orders.

Order View

```
*(1)Orderable Item: THIOTHIXENE CAP
      Instructions:
 *(2)Dosage Ordered: 325MG                 *(3)    Start: 07/22/94  09:00
 *(4)     Med Route: ORAL                  *(5)     Stop: 08/19/94  2:40
 *(6) Schedule Type: CONTINUOUS            (7)  Self Med: NO
 *(8)      Schedule: QID
  (9)   Admin Times: 08-12-16-20
*(10)       Provider: ZHIVAGO,DOCTOR
 (11) Special Instructions: TESTING

(12) Dispense Drug                      U/D        Inactive Date
-----------------------------------------------------------------------
      THIOTHIXENE 20MG U/D                2

Entry By: INPATIENT-MEDS,PROVIDER               Entry Date: 07/22/94  08:09
```

The Unit Dose Order View List displays detailed order information and allows actions to be taken on the selected Unit Dose Order. A number displayed to the left of the field name identifies fields that may be edited. This number is used when selecting fields to be edited. Fields marked with an "*" next to it's number will cause this order to be discontinued and a new one created if it is changed. If a pending order is selected, the system will determine any default values for fields not entered through CPRS and display them along with the data entered by the clinician.

actions that can be taken

```
+           Enter ?? for more actions
DC  Discontinue         ED  Edit              VF  Verify
HD  (Hold)              RN  (Renew)           AL  Activity Logs
```

This list contains each field included in the Unit Dose order.

☞ **Note**: Actions enclosed in parenthesis are not available. Fields that may be edited will be identified by a number displayed to the left of the field name. This number is used when selecting fields to be edited. Fields marked with an "*" next to it's number will cause this order to be discontinued and a new one created if it is changed.

New Order Entry

For Unit Dose order entry you must respond at the "Select DRUG:" prompt. Once you choose the drug, you can follow the same procedure as Unit Dose order entry, as defined in your user parameters.

• **DRUG**
Pharmacists' select Unit Dose medications directly from the DRUG file (#50). The Orderable Item for the selected drug will automatically be added to the order, and all dispense drugs entered for the order must be linked to that Orderable Item. If the Orderable Item is edited, data in the DOSAGE ORDERED field and the DISPENSE DRUG field (#12) will be deleted. If multiple dispense drugs are needed in an order, they may be entered by selecting the DISPENSE DRUG field (#12) from the edit list before accepting the new order. After each dispense drug is selected, it will be checked against the patient's current medications for duplicate drug or class orders, and drug-drug/drug-allergy interactions. See Order Checks for more information.

☞ **Note:** For IV order entry, you must bypass the "Select DRUG:" prompt in the *Inpatient Order Entry* option (by pressing the Return key) and then choose the IV type at the "Select IV TYPE:" prompt.

Refer to the IV Section of this manual for more information on IV Order Entry.

- **DOSAGE ORDERED**

To allow pharmacy greater control over the order display shown for Unit Dose orders on profiles, labels, MARs, etc., the DOSAGE ORDERED field is no longer required. If **no** DOSAGE ORDERED is defined for an order, the order will be displayed as:

```
DISPENSE DRUG NAME
Give: UNITS/DOSE  MEDICATION ROUTE  SCHEDULE
```

If DOSAGE ORDERED **is** defined for the order, it will be displayed as:

```
ORDERABLE ITEM NAME  DOSE FORM
Give: DOSAGE ORDERED  MEDICATION ROUTE  SCHEDULE
```

Note: If an order contains multiple DISPENSE DRUG, DOSAGE ORDERED will be required, and should contain the total dosage of the medication to be administered.

- **UNITS PER DOSE**

This is the number of units (tablets, capsules, etc.) of the dispense drug selected to be given when the order is administered. If no data is entered, the UNITS PER DOSE is assumed to be 1.

- **MED ROUTE**

This is the route of administration to be used for the order. If a default Medication Route is identified for the selected Orderable Item, it will be used as the default for the order.

- **SCHEDULE TYPE**

This defines the type of schedule to be used when administering the order. If the schedule type entered is one time, the order's start and stop dates must be the same. When a new order is entered or an order entered through CPRS is finished by pharmacy the default Schedule Type is determined as described below:

If a schedule type is defined for the Orderable Item selected, that schedule type is used for the order.

If no schedule type has been found and if no schedule is defined, schedule type is CONTINUOUS.

If no schedule type has been found and the schedule contains PRN, the schedule type is PRN.

If no schedule type has been found and the schedule entered is found in the ADMINISTRATION SCHEDULE file (#51.1), and a schedule type is defined for it, that schedule type is used for the order.

If no schedule type has been found and the schedule is "NOW", "STAT", "ONCE", or "ONE-TIME" the schedule type is ONCE.

If the schedule type determined above is DAY OF WEEK the schedule type is set to CONTINUOUS.

If no schedule type was determined above, the schedule type is CONTINUOUS

- **SCHEDULE**
This defines the frequency the order is to be administered. Schedules may be selected from the ADMINISTRATION SCHEDULE file (#51.1) or non-standard schedules may be used. A non-standard schedule is one that does not have a consistent interval between administrations. Unit Dose recognizes schedules in the following formats:

QxH - Hourly schedules where x is the number of hours between administrations

QxD - Daily schedules where x is the number of days between administrations

QxM - Monthly schedules where x is the number of months between administrations

If a schedule is defined for the Orderable Item selected when entering a new order, that schedule is displayed as the default for the order.

- **ADMINISTRATION TIMES**
This defines the time(s) of day the order is to be given. If the schedule for the order contains "PRN" any administration times for the order will be ignored. In new order entry the default administration times are determined as described below:

If administration times are defined for the Orderable Item selected, they will be shown as the default for the order.

If administration times are defined in the INPATIENT WARD PARAMETERS file (#59.6) file for the patient's ward and the order's schedule, they will be shown as the default for the order.

If administration times are defined for the Schedule, they will be shown as the default for the order.

- **SPECIAL INSTRUCTIONS**
This is any special instructions (using abbreviations whenever possible) needed for this order. This would include the physician's reason for ordering a PRN. This field utilizes the abbreviations and expansions from the MEDICATION INSTRUCTIONS file (#51).

- **START/DATE TIME**

This is the date and time the order is to begin. This package initially assigns the START DATE/TIME to the closest administration time or next admin. Time or NOW depends on the value of the DEFAULT START DATE CALCULATION field in the INPATINET WARD PARAMTERS file (#59.6). START/DATE TIME may not be entered prior to 7 days from the order's LOGIN DATE.

- **STOP/DATE TIME**

This is the date and time the order will automatically expire. This package initially calculates a default stop date, depending on the SITE PARAMETERS.

- **PROVIDER**

This identifies the provider who authorized the order. Only users identified as providers who are authorized to write medication orders may be selected.

- **SELF MED**

Identifies the order as to be given for administration by the patient. This prompt is only shown if the 'SELF MED' IN ORDER ENTRY field of the INPATIENT WARD PARAMETERS file (#59.6) is set to on.

Completing Orders Entered or Edited Through OE/RR

IV Fluids Orders

IV Fluid orders will always be finished by pharmacy as IV admixtures. These orders are passed to pharmacy with data in the following fields:

Additive with Strength (optional; multiple additives allowed)
Solution with volume (required, multiple solutions allowed)
Infusion Rate
Priority
Provider Comments (optional)

Finishing IV Fluid Orders

After the order is selected, default values for the remaining fields will be determined as is done for admixture orders entered through pharmacy, and an order view will then be displayed. The order will always automatically be assigned a type of Admixture. The pharmacist may Edit, Discontinue, or Finish the order. If Finish is chosen, the order is checked to be sure the information is correct and complete, and the order is redisplayed with actions of ACCEPT or Edit. If problems are found (provider or drugs inactive, start or stop dates invalid, etc.), the order cannot be accepted and finished until the problem is corrected. If a situation is encountered where more information is needed before the order can be processed, the user can enter an "^" and no changes will be saved for the order. If the order is correct, it may be accepted and the order will become active.

Inpatient Medications Orders

When a clinician creates a new order or edits an existing order through CPRS a pharmacist must finish the order. Inpatient Medication orders are determined to be IV or Unit Dose based on the Orderable Item assigned. If the Orderable Item is linked to an IV Additive or IV Solution, the order will be finished by pharmacy as IV. Otherwise it will be finished as a Unit Dose order. A field called ALLOW THE CHANGE OF ORDER TYPES ON ORDERS FROM OERR is included in the PHARMACY SYSTEM file (#59.7) that when enabled allows certain orders to be transferred between Unit Dose and IV during the finish process. If set to yes, the user will be asked whether to finish orders containing an Orderable Item that has been assigned a CORRESPONDING UD ORDERABLE ITEM or a CORRESPONDING IV ORDERABLE ITEM as Unit Dose or IV. If the order's type is changed, the original order will be discontinued and a new order containing the corresponding Orderable Item will be created and displayed. This function is only available when finishing orders using the Inpatient Order Entry option.

Inpatient Medication orders are passed to pharmacy with data in the following fields:

Orderable Item
Instructions
Dispense Drug (optional)
Medication Route
Schedule
Priority
Provider Comments (optional)

Finishing Inpatient Medication Unit Dose orders

After the order is selected, default values for the remaining fields will be determined and an order view will be displayed. The pharmacist may Bypass (take no action), Discontinue, or Finish the order. If Finish is chosen, the order is checked to be sure the information is correct and complete and the order is redisplayed with actions of ACCEPT or Edit. If problems are found (provider or drugs inactive, start or stop dates invalid, etc.) the order cannot be accepted and finished until the problem is corrected. If a situation is encountered where more information is needed before the order can be finished, the user can enter an "^" and no changes will be saved for the order. If the order is correct, Accept may be selected and the order will become non-verified or active depending on whether the finishing user has auto-verify enabled.

Finishing Inpatient Medication IV orders

After the order is selected, the user must first specify the order's IV type (Admixture, Piggyback, Syringe, etc.). Default values for the remaining fields will be determined in the same way as orders entered through pharmacy and an IV order view will be displayed. The pharmacist may Edit, Discontinue, or Finish the order. If Finish is chosen, the order is checked to be sure the information is correct and complete and the order is redisplayed with actions of ACCEPT or Edit. If problems are found (provider or drugs inactive, start or stop dates invalid, etc.), the order cannot be accepted and finished until the problem is corrected. If a situation is encountered where more information is needed before the order can be finished, the user can enter an "^" and no changes will be saved for the order. If the order is correct, Accept may be selected and the order will become active.

Other Order Actions - Edit, Hold, Discontinue, Renew

Edit

This allows modification of any field shown on the order view that is preceded by a number in parenthesis (#).

Asterisk: If a field marked with an asterisk is changed, the original order will be discontinued and a new order containing the edited data will be created. The Stop Date/Time of the original order will be changed to the date/time the new edit order is accepted. The old and new orders are linked and may be viewed using the History Log function. When the screen is refreshed, the field(s) that were changed will now be shown in **blinking reverse video** and "This change will cause a new order to be created" will be displayed in the message window.

Orderable Item or **Dosage Ordered** fields**:** If these fields are edited, the dispense drug data will not be transferred to the new order. If the Orderable Item is changed, data in the Dosage Ordered field will not be transferred. New Start Date/Time, Stop Date/Time, Login Date/Time, and Entry Code will be determined for the new order. Changes to other fields (those without the asterisk) will be recorded in the order's activity log.

Renew

Only active orders or those, which have been, expired less than 24 hours may be renewed. The default Start Date/Time for a renewal order is determined as follows:

Default Start Date Calculation = NOW
The default start date/time for the renewal order will be the order's Login Date/Time.

Default Start Date Calculation = USE NEXT ADMIN TIME
The original order's Start Date/Time, the new order's Login Date/Time, Schedule, and Administration Times are used to find the next date/time the order is to be administered after the new order's Login Date/Time. If the schedule contains "PRN" any administration times for the order are ignored.

Default Start Date Calculation = USE CLOSEST ADMIN TIME
The original order's Start Date/Time, the new order's Login Date/Time, Schedule, and Administration Times are used to find the closest date/time the order is to be administered after the new order's Login Date/Time. If the schedule contains "PRN" any administration times for the order are ignored.

After the new (renewal) order is accepted, the Start Date/Time for the new order becomes the Stop Date/Time for the original (renewed) order. The original order's status is changed to RENEWED. The renewal and renewed orders are linked and may be viewed using the History Log function. Once an order has been renewed it may not be renewed or edited.

Discontinue

When an order is discontinued the order's Stop Date/Time is changed to the date/time the action is taken. Pending and Non-verified orders are deleted when discontinued and will no longer appear on the patient's profile. An entry is placed in the order's Activity Log recording who discontinued the order and when the action was taken.

Hold

Only active orders may be placed on hold. Orders placed on hold will continue to show under the ACTIVE heading on the profiles until it is removed from hold. An entry is placed in the order's Activity Log recording the person who placed/removed the order from hold and when the action was taken.

Activity Log

This submenu allows viewing of a long or short profile, or a History Log of the order. A short activity log only shows actions taken on orders and does not include field changes. If a history log is selected, it will find the first order linked to the order where the history log was invoked from, then shows an order view of each order associated with it in the order that they were created.

Verify

Orders must be verified before they can become active and are included on the pick list, MAR, etc. If *AUTO-VERIFY is enabled for the pharmacist, new orders immediately become active after entry or completion (pending orders entered through CPRS). Orders verified by nursing prior to pharmacist verification are displayed on the profile under the active header marked with an -> next to the order number. When verify is selected, the user must enter any missing data and correct any invalid data before the verification is accepted.

 *AUTO-VERIFY is controlled by the ALLOW AUTO-VERIFY FOR USER field in the INPATIENT USER PARAMETERS file (#53.45).

Order Sets

An Order Set is a group of any number of pre-written orders. The maximum number of orders is unlimited. Order sets are created and edited using the *Order Set Enter/Edit* option found under the *Supervisor's Menu.*

Order sets are used to expedite order entry for drugs that are dispensed to all patients in certain medical practices or for certain procedures. Order sets are designed to be used when a recognized pattern for the administration of drugs can be identified. For example:

- A pre-operative series of medication administered to all patients undergoing a certain surgical procedure

- A certain series of drugs to be dispensed to all patients prior to undergoing a particular radiographic procedure

- A certain group of medications prescribed by a physician for all patients that is treated for a certain medical ailment or emergency.

Order sets allow rapid entering of this repetitive information, expediting the whole order entry process. Experienced users might want to set up all their more common orders as order sets.

Order set entry starts like other types of order entry, described above. At the "Select DRUG:" prompt, you will enter **S.NAME**. The **NAME** represents the name of a predefined order set that was created using the *Order Set Enter/Edit* option found on the *Supervisor's Menu.* The characters **S.** tell the software that this will not be a single new order entry for a single drug but a set of orders for multiple drugs. The **S.** is a required prefix to the name of the order set. If you type the characters **S.?** you will receive a list of the names of the order sets that are currently available. If you type **S.** (and press the spacebar and return) you will re-enter the previous order set.

After the entry of the order set, the computer will prompt you for the provider's name. After entry of the provider, the first order of the set will automatically be entered. The options available to you are different depending on the type of order entry process that is enabled–regular, abbreviated, or ward. If regular or abbreviated order entry is enabled, you will be shown one order at a time, all fields for each order of the order set and then the "ACTION" prompt. You can then choose to take action on the order. Once action is taken or bypassed, the next order of the order set will automatically be entered. After entry of all the orders in the order set, the computer will prompt you for more orders for the patient. At this point you proceed exactly as in new order entry, and respond accordingly.

Duplicate Orderable Items

You can use the VA FileMan convention of enclosing the duplicate entry name in double quotes to enter the same Orderable Item more than once, for example to add ACETAMINOPHEN to an order set already containing that drug.

Completing an Order entered through CPRS

When a clinician enters or edits an order through CPRS, the order must be finished and verified by a pharmacist. The pharmacist may perform different actions on the order depending on what action was taken by the clinician.

When a Clinician renews an entry through CPRS

When an order is renewed by a clinician through CPRS, the pharmacist needs to finish and verify this order. The same procedures are followed to finish the renewed order as to finish a new order with the following exceptions:

The PENDING RENEWAL orders may be speed finished. You may enter an **F**, for finish, at the "Select ACTION or ORDERS" prompt and then select the pending renewals to be finished. At this time, prompts are issued for the start date/time and stop date/time. These values are used as the start and stop dates and times for the pending renewals selected. You will also be prompted for the provider comments. All other fields will retain the values from the renewed order.

Discontinue All of a Patient's Orders
[PSJU CA]

This option allows a pharmacist or nurse to discontinue all of a patient's orders. Also, it allows a ward clerk to mark all of a patient's orders for discontinuation. If the ALLOW USER TO D/C ORDERS parameter is turned on to take action on active orders, then the ward clerk will also be able to discontinue orders. This parameter is set using the *Inpatient Parameter's Edit* option under the *Parameter's Edit* option, which is under the *Supervisor's Menu*.

The *Discontinue All of a Patient's Orders* option is then used to discontinue the selected orders. Remember that if you discontinue a non-verified order, it is deleted completely from the computer.

Hold All of a Patient's Orders
[PSJU HOLD ALL]

This option allows a pharmacist or nurse to place all of a patient's active orders on hold in order to temporarily stop the medication from being dispensed, or take all of the patient's orders off of hold to restart the dispensing of the medication.

The option will take no action on individual orders that it finds already on hold. When this option is used to put all orders on hold, the system will print labels, for each medication order newly put on hold, indicating on the label that the medication is on hold. Also, the profile will notify you that the patient's orders have been placed on hold, and the letter **H** will be placed in the Status/Info column on the profile for each formerly active order.

When the option is used to take all orders off of Hold, the system will reprint labels for the medication orders that were taken off Hold and indicate on the label that medication is off hold. Again, this option will take no action on individual orders that it finds were not on hold. The profile will notify you that the patient's orders have been taken off hold.

Individual orders for a patient can be placed on hold or taken off of hold through the *Order Entry* and *Non–Verified/Pending Orders* options.

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Pharmacist User Manual

What You Can Edit

EUP Edit Inpatient User Parameters
[PSJ UEUD]

This option allows users to edit various Inpatient User parameters; any changes will take effect immediately. The prompts you will encounter are as follows:

"PRINT PROFILE IN ORDER ENTRY:"

Enter **yes** for the opportunity to print a profile after entering Unit Dose orders for a patient.

"INPATIENT PROFILE ORDER SORT:"

The Inpatient profile will sort orders either by medication or by start date of order. Choose which of these you want to use.

"LABEL PRINTER:"

Enter the device on which you want labels to print.

"USE WARD LABEL SETTINGS:"

Enter **yes** to have any labels created by your actions print on the printer designated for the *ward* instead of the printer designated for the *pharmacy*.

ESD Edit Patient's Default Stop Date
[PSJU CPDD]

🔒 Locked with the PSJU PL key

The default stop date is the date used as a default value for the STOP DATE/TIME of Unit Dose orders during order entry and renewal processes. This value is used only if the corresponding ward parameter is enabled. The order entry and renewal processes will sometimes change this date.

When the SAME STOP DATE ON ALL ORDERS parameter is enabled, the module will assign a default stop date for each patient. This date is initially set when the first order is entered for the patient, and can change when an order for the patient is renewed. This date is shown as the default value for the stop date of each of the orders entered for the patient.

This option allows the pharmacist to edit a patient's default stop date.

☞   **Note:** If this parameter is not enabled, you can still edit a patient's default stop date. But unless the parameter is enabled, the default stop date will not be seen or used by the module.

PIck List Menu
[PSJU PLMGR]

🔒 All options under the PIck List Menu are locked with the PSJU PL key

PIck List
[PSJU PL]

The *PIck List Menu* option is used to create the *Pick List* report. When selecting this option, you are prompted for:

1. The **WARD GROUP** for which you want to run the pick list. Only pharmacy-type ward groups are selectable.

2. The **START DATE/TIME** of the pick list. This is the date and time the nurses will start administering the drugs from this pick list. You are only prompted for the start date/time on the first pick list run for each ward group. For each pick list run afterwards, the *Pick List* option automatically sets the start date/time as one minute past the stop date/time of the previous pick list.

3. The **STOP DATE/TIME** of the pick list. This is the date and time the nurses will stop administering the drugs from this pick list (and start using the next one).

Each pick list is normally sorted by the following patient information:

1. **TEAM**– The administering team (cart).
2. **WARD**– The wards found under the selected ward group.
3. **ROOM-BED**– The room and bed the patient is currently occupying.
4. **PATIENT NAME**– Patients on the wards in the selected ward group.

And for each patient, the orders are sorted by:

5. **SCHEDULE TYPE**– The schedule type of the patient's orders.
6. **DRUG NAME**– The names of each medication in the patient's orders. If an order has been verified by a nurse but not by a pharmacist and no dispense drugs have been chosen, the orderable item will print. Otherwise, the pick list will print the Dispense Drug.

☞ **Note:** The way the pick list sorts the patient information can be manipulated for each ward. If no data is entered into the INPATIENT WARD PARAMETERS file (#57.7), the pick list will not sort by TEAM. By editing the corresponding ward parameters, the supervisor can choose to not sort by WARD, to sort by BED-ROOM instead of ROOM-BED, or not to sort by ROOM or BED at all.

In addition to the previous sort information, the pick list will show (for each order):

- DOSAGE ORDERED
- MED ROUTE
- SCHEDULE
- ADMIN TIMES, if entered
- SPECIAL INSTRUCTIONS, if entered
- START and STOP DATE/TIMES
- UNITS PER DOSE
- UNITS NEEDED
- UNITS DISPENSED

The UNITS NEEDED are calculated by the pick list. Under the "Units Needed" column for an order, you will see a number or one of the following codes:

HD	–	The order has been placed on hold.
NV	–	The order has been verified by a nurse, but not by a pharmacist.
OE	–	The order was being edited at the time the pick list was run.
OI	–	The order is invalid because of missing or invalid data.
SM	–	The order is a SELF MED.
WS	–	The drug is a Ward Stock item or a Controlled Substance.

If a patient has orders that have expired or have been discontinued within 24-hours prior to the start date/time, those orders will show either before or after the active orders, depending on how the "PRINT NON-ACTIVE ORDERS FIRST" is set-up in the *Ward Groups* option under the *Supervisor's Menu*.

For each order that can be dispensed through the ATC, the words ATC will print beside the drug name. Please note that orders that have fractional units-per-dose, units needed/dispensed greater than 999, or orders such as PRN for which units cannot be determined, cannot be sent to the ATC.

The pick list will start a new page for each team, and if sent to a printer, will print Filled by: and Checked by: lines for signatures after each team.

As with most other Unit Dose reports, the pick list can be queued, but it has an added feature unique to the *Pick List* option. If at the "DEVICE" prompt after you queue the pick list, you do not enter a device, but enter an up-arrow (^) or period (.), the pick list will still run and compile its data, but not print. This is most useful if you do not need a printout until after you have run an update. The *RPL Reprint Pick List* option may also be used to print the compiled pick list.

If the start date of the last pick list run for a ward group has not passed, you can *re-run* the pick list. After selecting the ward group, the *Pick List* option will automatically ask you if you want to re-run the pick list. You will then be able to enter a new stop date. Re-running a pick list deletes all of the old data, and recalculates all of the orders. You can also update the pick list as long as the start date has not passed.

ENter Units Dispensed
[PSJU PLDP]

This option allows you to enter doses actually dispensed to the cart for each selected pick list. You can even enter the units dispensed for a pick list that has been run, but for which the start time has not yet come.

You can choose the length of patient profile you wish to view, the long profile lists all order, but the short profile lists only active orders. You will be asked to select the order on which you wish to take action.

> **Note:** If an update is run after units dispensed are entered, the units dispensed are lost for those orders actually updated.

You will be asked, "DO YOU WANT TO SEE PRN MEDS ONLY?" If you answer **yes** only those orders that have PRN as a SCHEDULE TYPE, or PRN as part of the schedule, will be shown.

This report will print the orders in the sequence that they are printed in the pick list. When using this option, you should have a printed copy of the selected pick list, marked with the units dispensed. For each order, you will be shown the drug name and the number of units needed. If the units needed show as a code on the printed copy (e.g., **HD** for order placed on hold), they will show as 0 (zero) in this option.

For each order that does not have a WS or ATC or OI code, you will be prompted to enter the actual number of units dispensed. There are a variety of ways to facilitate this process, especially if the amount dispensed is the same as the amount needed:

1. If the amount dispensed is the same as the amount needed, simply press the

RETURN key. The amount needed will be accepted as the amount dispensed.

2. If you want to skip over to the next patient, enter an up-arrow (^). If you wish to skip to a specific patient enter an up-arrow and the first few letters of the patient's last name (^XXXX). Enter two up-arrows (^^) to jump to the next team. Enter three up-arrows (^^^) to jump to the end of the pick list. Any orders skipped over will use the amount needed as the amount dispensed when the pick list is filed away.

Once you have reached the end of the pick list, you are asked, "ARE YOU FINISHED WITH THIS PICK LIST? YES//." By entering an **N** here, the same pick list is shown to you again, giving you the chance to edit the data you have just entered. Simply press the RETURN key at this prompt when you are finished with the pick list.

Once you have finished with a pick list, you are asked, "MAY I FILE THE DATA IN THIS PICK LIST AWAY? NO//." Enter an **N** (or press the RETURN key) if you will need to enter or edit the data at a later date. Enter a **Y** if no more data is to be entered or edited. When a pick list is filed away, the data is placed in the respective patients' orders and in a file used for printing cost reports. If an order does not have the Units Dispensed entered, the Units Needed value is used.

EXtra Units Dispensed
[PSJU EUD]

This option allows you to enter the number of extra units dispensed for an order, and is used when the nurse on the ward has medications that have been destroyed, lost, etc., and replacements are dispensed. Any data entered here is included in the various cost reports.

You can choose the length of patient profile you wish to view, the long profile lists all orders, but the short profile lists only active orders. You will be asked to select the order on which you wish to take action.

If your site is using Baxter's ATC for the dispensing of unit dose medications, you will be given the opportunity to use the ATC to dispense any extra units entered for medication designated for the ATC.

☞ **Note:** Pick lists are filed away when you exit this option. Please allow approximately two hours for data to be entered before running any cost reports.

RRS Report Returns
[PSJU RET]

This option allows you to enter the number of returned units into the medication order record. Units can be returned when a patient is discharged or when the medication is discontinued, for example. Usually you will enter positive numbers; however the system will allow you to enter negative numbers to allow for corrections. Any data entered here is reflected in the various cost reports.

Only active, discontinued, or expired orders are selectable. Once you select the patient, you are prompted to choose the length of patient profile you wish to view. The profile will list the orders for that patient. You can then select the order(s) for which you wish to enter returns.

RPL Reprint Pick List
[PSJU PLRP]

This option allows you to print or reprint any pick list or pick list update previously run. The *Reprint* option does not recalculate any data; it simply reprints the pick list. If the pick list selected has had an update run for it, you will be given the choice of printing the entire pick list or only the last update run. The entire pick list will include any data generated from an update. Any dispensed units that have been entered will also print.

Send Pick List To ATC
[PSJU PLATCS]

This option allows you to send pick lists to Baxter's ATC (referred to as ATC), a dispensing machine for unit dose medications. Once you enter the option, you are asked to select the ward group you wish to activate. Once the ward group is selected, you must choose the pick list you wish to send to the ATC. You can only send the pick lists that have not been filed away.

> **Note:** Only those medications previously designated as ATC items will be sent to the ATC. You can now send the Pick List to the ATC by admin date/time (Go into the *Supervisor's Menu/Parameters Edit Menu/Systems Parameters Edit* and set ATC SORT PARAMETERS to ADMIN TIME or ATC MNEMONIC). Orders with a fractional Units-per-Dose, units needed/dispensed over 999, or PRN orders will not be sent to the ATC.

If, for whatever reason, the pick list sent to the ATC does not completely fill, you can restart the pick list at the point in which the fill stopped. If you see that a fill has aborted, you will need to wait approximately 15 minutes before being able to restart the same pick list.

> **Note:** If a site elects to send Pick Lists to the ATC machine by ADMIN TIME, the following change must be made to the ATC machine parameter:
>> At the password screen, enter **F8** for system parameter. Move over to SORT parameter. Your choices will be Time or Medication. Select Medication and press enter.

Update Pick List
[PSJU PLUP]

This option allows you to update a pick list that has previously been run, but has not yet become active. Updating a pick list adds any new orders, and any orders that have been edited since the pick list was first run.

You will only be able to select ward groups that have a pick list for which the start date has not passed. You can also directly select the pick list to update by its number, which prints in the upper left corner of every page of the pick list.

Enter a **P** to have the entire pick list, including the updated orders, print. Enter a **U** to have only the updated orders print. After the updated orders have printed, they are added to the original pick list.

If you print an update only, and have not queued the report, you will be prompted with: "DO YOU NEED A REPRINT OF THIS UPDATE?" If you answer yes, the report will prompt you for a new device.

All about MARs

Reports Menu
[PSJU REPORTS]

Contains various reports generated by the Unit Dose package. All of these reports are QUEUABLE, and it is **strongly suggested** that these reports be queued when run.

24 Hour MAR
[PSJU 24H MAR]

The 24 Hour MAR is a report that can be used to track the administration of a patient's medications over a 24-hour period. The 24 Hour MAR includes:

- Date/time range covered by the MAR
- Patient demographic data
- Time line
- Information about each order

The order information consists of:

- Order date
- Start date
- Stop date
- Schedule type (a letter code next to the administration times)
- Administration times (will be blank if an IV order does not have a schedule)
- Drug name
- Strength (if different from that indicated in drug name)
- Medication route abbreviation
- Schedule
- Verifying pharmacist's and nurse's initials.

You can print the MAR by ward group (**G**), by ward (**W**), or by patient (**P**). If you print by patient you will be given the opportunity to select more than one patient. The computer will keep prompting, "Select another PATIENT". If an (^) is entered, you will return to the report menu. When all patients are entered, press return at this prompt.

> **Note:** If you choose to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the MAR may be sorted by administration time, patient name, or room-bed.

There are six medication choices in V. 5.0. You may select multiple choices of medications to be printed on the 24 Hour MAR. Since the first choice is ALL Medications, you will not be allowed to combine this with any other choices. The default choice is "Non-IV Medications only" if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. For Ward group.
3. Selected by patients and patients are from different wards.

The MAR is separated into two sheets. The first sheet is for continuous medications and the second sheet is for one-time and PRN medications. When you run the 24 Hour MAR with orders, both sheets will print for each patient, even though the patient might only have one type of order. You can also print blank MARs and designate which sheets to print. You can print continuous-medication sheets only, PRN sheets only, or both. The blank MARs contain patient demographics, but no order data. Order information can be added manually or with labels.

Each sheet of the 24 Hour MAR consists of three parts:

1. The top part of each sheet contains the patient demographics.

2. The main body of the MAR contains the order information and an area to record the medication administration.

    a. The order information prints on the left side of the main body, printed in the same format as on labels. Labels can be used to add new orders to this area of the MAR (Labels should *never* be placed over order information already on the MAR). Renewal dates can be recorded on the top line of each order.

    b. The right side of the main body is where the actual administration is to be recorded. It is marked in one hour increments on the 24 Hour MAR to simplify this.

3. The bottom of the form allows space for signatures/titles, initials for injections, allergies, injection sites, omitted doses, reason for omitted doses, and initials for omitted doses.

At the "Enter START DATE/TIME for 24 Hour MAR:" prompt, indicate, in military time, the date, and the time of day the 24 Hour MAR is to start, including leading and trailing zeros. The time that you enter into this field will print on the 24 Hour MAR as the earliest time on the time line. If the time is not entered at this prompt, the time will default to the time specified in the ward parameter, "START TIME OF DAY FOR 24 HOUR MAR:". If the ward parameter is blank, then the time will default to 0:01 a.m. system time.

Please keep in mind that the MAR is designed to print on stock 8 $^1/_2$" by 11" paper at 16 pitch (6 lines per inch). We strongly recommend that this report be queued to print at a later time.

7 Day MAR
[PSJU 7D MAR]

The 7 Day MAR (Medication Administration Record) is a report form that can be used to track the administration of patients' medications.

The 7 Day MAR includes:

- Date/time range covered by the MAR
- Patient demographic data
- Time line
- Information about each order

The order information consists of:

- Order date
- Start date
- Stop date
- Schedule type (a letter code next to the administration times)
- Administration times (will be blank if an IV order does not have a schedule)
- Drug name
- Strength (if different from that indicated in drug name)
- Medication route abbreviation
- Schedule
- Verifying pharmacist's and nurse's initials.

You can print the MAR by ward group (**G**), by ward (**W**), or by patient (**P**). If you print by patient you will be given the opportunity to select more than one patient. The computer will keep prompting, "Select another PATIENT". If an (^) is entered, you will return to the report menu. When all patients are entered, press return at this prompt.

☞ **Note:** If you choose to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the MAR may be sorted by administration time, patient name, or room-bed.

You may select multiple choices of medications to be printed on the 7 Day MAR. Since the first choice is ALL Medications, you will not be allowed to combine this with any other choices. The default choice is "Non-IV Medications only" if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. For Ward group.
3. Selected by patients and patients are from different wards.

The 7 Day MAR also allows you to choose whether to print one of the two sheets, continuous-medication or PRN, or to print both.

Each sheet of the MAR consists of three parts:

1. The top part of each sheet contains the patient demographics.

2. The main body of the MAR contains the order information and an area to record the medication administration.

   a. The order information prints on the left side of the main body, printed in the same format as on labels. Labels can be used to add new orders to this area of the MAR (Labels should *never* be placed over order information already on the MAR). Renewal dates can be recorded on the top line of each order.

   b. The right side of the main body is where the actual administration is to be recorded. On the continuous-medication sheet, the right side will be divided into seven columns, one for each day of the range of the MAR. Asterisks will print at the bottom of the columns corresponding to the days on which the medication is not to be given (e.g., Orders with a schedule of Q3D would only be given every three days, so asterisks would appear on days the medication should not be given).

3. The bottom of the form is designed to duplicate the bottom of the current CMR (form 10-2970), the back of the current PRN and ONE TIME MED RECORD CMR (form 10-5568d). The MAR is provided to record other information about the patient and his or her medication(s). It is similar to the bottom of the 24 Hour MAR, but lists more injection sites and does not allow space to list allergies.

For IV orders that have no schedule, ******* will print on the bottom of the column corresponding to the day the order is to expire. On the continuous-medication sheet only, there might be additional information about each order under the column marked notes. On the first line, **SM** will print if the order has been marked as a self med order. The letters **HSM** will print if the order is marked as a hospital supplied self med. On the second line, **WS** will print if the order is found to be a ward stock item and **CS** will print if the item is a Controlled Substance.

If the order is printed in more than one block, the RPH and RN initial line will print on the last block.

The answer to the prompt, "Enter START DATE/TIME for 7 Day MAR:" determines the date range covered by the 7 Day MAR. The stop date is automatically calculated. Entry of *time* is not required, but if a time is entered with the date, only those orders that expire after the date and time selected will print. If no time is entered, all orders that expire on or after the date selected will print.

Please keep in mind that the MAR is designed to print on stock 8 $^{1}/_{2}$" by 11" paper at 16 pitch (6 lines per inch). We strongly recommend that this report be queued to print at a later time.

14 Day MAR
[PSJU 14D MAR]

The 14 Day MAR (Medication Administration Record) is a report form that can be used to track the administration of patients' medications.

The 14 Day MAR includes:

- Date/time range covered by the MAR
- Patient demographic data
- Time line
- Information about each order

The order information consists of:

- Order date
- Start date
- Stop date
- Schedule type (a letter code next to the administration times)
- Administration times (will be blank if an IV order does not have a schedule)
- Drug name
- Strength (if different from that indicated in drug name)
- Medication route abbreviation
- Schedule
- Verifying pharmacist's and nurse's initials.

You can print the MAR by ward group (**G**), by ward (**W**), or by patient (**P**). If you print by patient you will be given the opportunity to select more than one patient. The computer will keep prompting, "Select another PATIENT". If an (^) is entered, you will return to the report menu. When all patients are entered, press return at this prompt.

> **Note:** If you choose to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the MAR may be sorted by administration time, patient name, or room-bed.

There are six medication choices in V. 5.0. You may select multiple choices of medications to be printed on the 14 Day MAR. Since the first choice is ALL Medications, you will not be allowed to combine this with any other choices. The default choice is "Non-IV Medications only" if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. For Ward group.
3. Selected by patients and patients are from different wards.

The 14 Day MAR allows you to choose whether to print one of the two sheets, continuous-medication or PRN, or to print both.

Each sheet of the MAR consists of three parts:

1.   The top part of each sheet contains the patient demographics.

2.   The main body of the MAR contains the order information and an area to record the medication administration.

   a. The order information prints on the left side of the main body, printed in the same format as on labels. Labels can be used to add new orders to this area of the MAR (Labels should *never* be placed over order information already on the MAR). Renewal dates can be recorded on the top line of each order.

   b. The right side of the main body is where the actual administration is to be recorded. On the continuous-medication sheet, the right side will be divided into 14 columns, one for each day of the range of the MAR. Asterisks will print at the bottom of the columns corresponding to the days on which the medication is not to be given (e.g., Orders with a schedule of Q3D would only be given every three days, so asterisks would appear on two days out of three).

3.   The bottom of the MAR is provided to record other information about the patient and his or her medication(s). It is similar to the bottom of the 24-hour MAR, but lists more injection sites.

For IV orders that have no schedule, **** will print on the bottom of the column corresponding to the day the order is to expire. On the continuous-medication sheet only, there might be additional information about each order under the column marked notes. On the first line, **SM** will print if the order has been marked as a self med order. The letters **HSM** will print if the order is marked as a hospital supplied self med. On the second line, **WS** will print if the order is found to be a ward stock item and **CS** will print if the item is a Controlled Substance.

The answer to the prompt, "Enter START DATE/TIME for 14 Day MAR:" determines the date range covered by the 14 Day MAR. The stop date is automatically calculated. Entry of time is *not* required, but if a time is entered with the date, only those orders that expire after the date and time selected will print. If no time is entered, all orders that expire on or after the date selected will print.

Please keep in mind that the MAR is designed to print on stock 8 $^1/_2$" by 11" paper at 16 pitch (6 lines per inch). We strongly recommend that this report be queued to print at a later time.

AP1 Action Profile #1
(Now using Orderable Item instead of Primary Drug)
[PSJU AP-1]

The Action Profile #1 is a form that contains all of the active inpatient medication orders for one or more patients. These patients may be selected individually by patient name, by ward, or ward group. If you choose to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the profile may be sorted by patient name or room-bed.

You may select multiple choices of medications to be printed on the Action Profile #1. Since the first choice is ALL Medications, you will not be allowed to combine this with any other choices. The default choice is "Non-IV Medications only" if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. You chose to select by ward group.
3. Selected by patients and patients are from different wards.

The form is printed so that the attending physician will have a method of periodically reviewing these active medication orders. If you choose to run this option by patient, you are given the opportunity to select as many patients as you desire, but only those that have **active** orders.

Also on this profile, the physician can renew, discontinue, or take no action regarding the active orders for each patient. A new order will be required for any new medication prescribed or for any changes in the dosage or directions of an existing order. If no action is taken, a new order is not required.

If you choose to enter a start and stop date, only patients with active orders occurring between those dates will print (for the ward or wards chosen). The start and stop dates must be in the future (NOW is acceptable). Time is required only if the current date of TODAY or T is entered.

It is recommended that the action profiles be printed on two-part paper, if possible. Using two-part paper allows a copy to stay on the ward and the other copy to be sent to the pharmacy.

> **Note:** Verified and Non-verified allergies and adverse reactions are now displayed on the report header.

AP2 Action Profile #2
(Now using Orderable Item instead of Primary Drug)
[PSJU AP-2]

The *Action Profile #2* option is similar to the *Action Profile #1* option (see previous option) with the added feature that you can show only orders that will expire. This is much like Stop Order Notices Report (see the section on Inpatient Stop Order Notices).

You can run the *Action Profile #2* option by patient, ward, or ward group. If you choose to run this option by patient, you are given the opportunity to select as many patients as you desire, but you will not get a report if the patient has no active orders.

If you choose to run the option for a ward or a ward group, you are prompted to choose the ward or ward group for which you want to run the option. You are first asked if you want to sort (print) Action Profiles by team or treating provider. You are then prompted for start and stop dates. Only those patients with at least one active order that has a stop date between the dates chosen will print. If entered, the start and stop dates must be in the future (NOW is acceptable). Time is required only if the current date of TODAY or T is entered. A future date does not require time to be entered.

It is recommended that the action profiles be printed on two-part paper, if possible. Using two-part paper allows a copy to stay on the ward and the other copy to be sent to the pharmacy.

Medications Due Worksheet
[PSJ MDWS]

This report lists active medications (Unit Dose and IV) that are due within a selected 24 hour period. You will be able to select by ward group, ward, or individual patients. If you choose to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the Med Due Worksheet may be sorted by administration time, patient name, or room-bed. However, if you choose to select by patient, multiple patients can be entered.

For IV orders that have no schedule, the projected administration times will be calculated based on the order's volume, flow rate, and start time. An * will be printed for the admin. times instead of the projected admin. times.

If the "MAR order Selection Default" field for the ward parameter is defined, the default will be displayed at the "Enter Medications Due Worksheet type" prompt.

The default choice is "Non-IV Medications only" if:

      1. The MAR ORDER SELECTION DEFAULT parameter was not defined.

      2. You chose to select by Ward Group.

      3. You are selecting by patients and patients are from different wards.

The PRN medication orders will be printed if the user enters yes at the "Would you like to include PRN Medications (Y/N)?" prompt. PRN orders will be listed after all continuous and one-time orders are printed.

INQuiries Menu
[PSJU INQMGR]

The *Inquiries Menu* option allows you to view information concerning standard schedules and drugs. You cannot edit any information in this option, so there is no danger of disrupting the Unit Dose module's operation. The *Inquiries Menu* contains the following suboptions:

Dispense Drug Look-Up
[PSJU INQ DRUG]

This option allows you to see what drugs are in the DRUG file (#50), and any Unit Dose information pertaining to them.

At the "Select DRUG:" prompt, you can answer with drug number, quick code, or VA drug class code (for IV, solution print name, or additive print name). Information about the selected drug will be displayed on your computer screen.

Standard Schedules
[PSJU INQ STD SCHD]

It is extremely important for all users to know the method of schedule input and this option allows you to practice the method used by Unit Dose. When you enter a standard schedule, the system will echo back the corresponding Administration times.

At the "Select STANDARD SCHEDULE" prompt, enter an administration schedule abbreviation, to view information pertaining to that schedule. An explanation of the selected schedule will be displayed on your computer screen. To list the available administration schedule abbreviations, answer the "Select STANDARD SCHEDULE" prompt with a question mark (?).

IPF Inpatient Profile
[PSJ PR]

This option allows you to view the Unit Dose and IV orders of a patient simultaneously. You can conduct the Inpatient Profile search by patient, ward, or ward group. If you select to sort by ward, the administration teams may be specified. The default for the administration team is ALL and multiple teams may be entered. If selecting by ward or ward group, the profile may be sorted by patient name or room-bed.

When you access this option from the Unit Dose module for the first time within a session, you are first asked to select the IV room in which you wish to enter orders. You are then given the label and report devices defined for the IV room you choose. If no devices have been defined, you will be given the opportunity to edit them. If you exit this option and re-enter within the same session, you are shown your current label and report devices.

In the following description we will talk only about viewing a profile by patient, but ward and ward group are handled similarly.

After you select the patient for whom you need to view a profile, you are asked to choose the length of profile. You can choose to view a long or short profile or, if you decide not to view a profile for the chosen patient, you can select "NO profile" to return to the "Select PATIENT" prompt and choose a new name.

Once you choose the length of profile you wish to view, you can print the patient profile (by accepting the default or typing **P** at the "SHOW PROFILE only, EXPANDED VIEWS only, or BOTH? Profile//" prompt), an expanded view of the patient profile (by typing **E**), or both (by typing **B**). The expanded view lists the details of each order for the patient. If you choose to print the expanded view or both the expanded view and the profile, you can also print the activity logs of the orders.

The advantage of this option is that by viewing the combined UD/IV profile of a patient, you can quickly determine if any corrections or modifications need to be made for existing or future orders based on Unit Dose or IV medications already being received by the patient. Sometimes the pharmacist must revise a prospective order for a patient based on the Unit Dose or IV medications already prescribed for the patient.

> **Note:** For IV orders, the short and long activity logs give you the same results. However, for Unit Dose orders, the long activity log shows all activities of an order, while the short activity log excludes the field changes, and shows only the major activities. Verified and Non-verified drug allergies and adverse reactions are now displayed on the profile header.

Align Labels
[PSJI AL]

This option allows you to align the labels on the Label printer. It will always print three test labels.

Label Print/Reprint
[PSJU LABEL]

This option allows you to print new unprinted labels that were created and saved through various Unit Dose options and that have not been removed from the system. You can also reprint the most recent label for any order containing a label record.

Upon entering this option, you will first be informed if there are any unprinted new labels from auto-canceled orders (i.e., due to ward or service transfers). If you want to print these labels, you will be shown a list of wards to choose form. The labels for a patient will be under the ward from which they were transferred. If you do not want auto-cancel labels printed, you are asked if you want to delete them. Deletion will be for all auto-cancel labels.

Next, you will be told if you have any unprinted new labels. You can choose to print them now or later. If you choose to print the labels later, the information will be saved, otherwise, it will be purged from the system.

You can choose to print labels for a ward group, ward, or for an individual patient. If you choose ward group or ward, you will enter the label start date/time, and the labels will be printed on the device you select. If, for example, you enter T-2 as the label start date, only labels created after T-2 will be printed.

If you choose to print or reprint labels for an individual patient, you will first be shown an inpatient profile which includes both unit Dose and IV orders. You can then print unit dose labels for IV orders as well as Unit Dose orders. You can choose one or more orders from the profile. The label(s) for those orders will be printed on the device you select.

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Pharmacist User Manual

Reports, Reports, and more Reports

AUthorized Absence/Discharge Summary
[PSJU DS]

This report allows you to determine what action to take on a patient's unit dose orders if the patient is discharged from the hospital or will leave the hospital for a designated period of time (authorized absence). The form is printed so that the physician can place the active orders of a patient on hold, take no action on the order, or continue the order upon discharge or absence. If the physician wishes to continue the order upon discharge, then he or she can identify the number of refills, the quantity, and the number of days for the order to remain active. If no action is taken on the order it will expire or be discontinued.

You can run the authorized absence/discharge summary by patient, ward, or ward group. If you choose to run this option by patient, you are given the opportunity to select as many patients as you desire, but only patients with active orders can be selected.

If you choose to run this option by ward or ward group, you will be prompted for start date and stop date. Entry of these dates is not required, but if a start and stop date are entered, a discharge summary will print only for those patients that have at least one order that will be active between those dates. If you do not enter a start date, all patients with active orders will print (for the ward or ward group chosen). If a clinic visit has been scheduled, the date will print. If more than one has been scheduled, only the first one will print. We recommend that you queue this report to print when user demand for the system is low.

For copayment purposes, information related to the patient's service connection is shown on the first page of the form (for each patient). If the patient is a service-connected less than 50% veteran, the physician is given the opportunity to mark each non-supply item order as either SERVICE CONNECTED (SC) or NON-SERVICE CONNECTED (NSC).

☞ **Note:** Verified and Non-Verified allergies and adverse reactions are now displayed on the report header.

Extra Units Dispensed Report
[PSJU EUDD]

Allows the user to print a report showing the amounts, date dispensed, and the initials of the person who entered the dispensed drug. This can be printed by patient, ward, or a ward group. If you choose to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the profile may be sorted by patient name or room-bed.

INpatient Stop Order Notices
[PSJ EXP]

The *INpatient Stop Order Notices* option produces a list of patients' medication orders which are about to expire. Action must be taken (using VA FORM 10-1158) if these medications are to be reordered. This option will list both Unit Dose orders and IV orders. You may choose to print All, which is the default, or either the UD or IV orders.

Special Instructions for Unit Dose orders and other Print information for IV orders are listed on the report. IV orders are sorted by the orderable item of the first additive or solution in the order. The orderable item with each additive and solution are displayed along with the strength/volume specified. The schedule type for all IV orders is assumed to be continuous.

If you choose to print by Ward, you may select to sort by Administration teams. ALL teams, which is the default, multiple teams, or one Administration team may be chosen.

> **Note:** The special instructions field now prints on UD orders. Verified and Non-Verified allergies and adverse reactions are now displayed on the report header.

Patient Profile (Extended)
[PSJ EXTP]

This report allows the viewing of all the orders on file for a patient. You can view all of the orders that have not been purged or enter a date to start searching from.

Order Check

Order check will be processed for:
- Pending Inpatient Meds IVs
- New back door IV
- When a new additive or solution is add to the order

Order checks will NOT be processed for:
- Pending Fluid IVs
- Pending Renew IVs
- Renew IV from back door

Routines use in the order checks:
^PSGSICHK
    ENDDC ^PSOORDRG
        ENCHK^PSJORUT2
    ORDCHK^PSJLMUT1

Unit Dose
  – All active, non-verified and pending orders are included in the order
    checks list call by ^PSOORDRG.

IV orders:
- Pending IV fluid will be included in the order checks list.
- The default additive/solution for pending Inpatient Meds IV will be
  checked against the order checks list.
- Active IV orders will be included in the order checks list.

Order Checks warnings will be displayed/processed in the following
order:

1) Duplicate drug or class
2) Critical or significant drug-drug interactions
3) Critical or significant drug-allergy interactions

These checks will be performed at the dispense drug level. All pending,
non-verified, and active orders will be included in the check. Order
checks for IV orders will use the dispense drugs linked to each
additive/solution in the order. If the order is entered by Orderable Item
only the checks will be performed at the time the dispense drug(s) are
specified. The checks performed include:

Duplicate Drug - If the patient is already receiving an order containing the dispense drug selected for the new order, the duplicate order will be displayed and the user will be asked if they wish to continue. Entry of duplicate drugs will be allowed. Only Additives will be included in the duplicate drug check for IV orders. The solutions are excluded from this check.

Duplicate Class - If the patient is already receiving an order containing a dispense drug in the same class as one of the dispense drugs in the new order, the order containing the drug in that class will be displayed and the user will be asked if they wish to continue. Entry of drugs in the same class will be allowed.

Drug-Drug Interactions:
Drug-drug interactions will be either critical or significant. If the dispense drug selected is identified as having an interaction with one of the drugs the patient is already receiving the order the new drug interacts with will be displayed.

An Outpatient order will be displayed if the order is a duplicate drug, duplicate class or drug-drug interactions to the current Inpatient order.

Drug-Allergy Interactions:
Drug-allergy interactions will be either critical or significant. If the dispense drug selected is identified as having an interaction with one the patient allergies, the allergy the drug interacts with will be displayed.

Order checks are not performed for renewals. Order checks are only performed when a new drug is selected in new order entry or edit.

SIGNIFICANT INTERACTIONS
(Interactions encountered while entering IV orders will be treated as described for the pharmacist)

Pharmacist:
User is allowed to enter an intervention but one is not required. No warning labels are printed.

Nurse:
User is allowed to enter an intervention but not required. No warning labels are generated.

Technician and Ward Clerk:
  No intervention may be entered. If a label is printed, a warning label will proceed it. If the order is verified by a nurse before the pharmacist, the nurse will not be prompted to enter an intervention, and a warning label will be generated. When the pharmacist verifies the order, they will be asked if an intervention is to be entered but one is not required. No warning labels are generated on verification by pharmacy.

CRITICAL INTERACTIONS

Pharmacist:
  User must enter an intervention before continuing. No warning labels are generated.

Nurse:
  User must enter an intervention before continuing. No warning labels are generated.

Technician and Ward Clerk:
  User is warned that the drug triggered a critical interaction and is not allowed to continue entering the order.

IV Drug-Drug Interactions for Pharmacist:
  Significant (allow intervention and proceed)
  Critical (force into intervention before proceeding)

IV Drug-Drug Interactions for non-pharmacist:
  Significant or Critical (allow to proceed and print an "interaction" label and a regular IV label)

UD Drug-Drug Interactions for Pharmacist:
  See IVs above

UD Drug-Drug Interactions for non-pharmacist:
  If labels are turned on, generate a warning label along with a regular label. Anywhere this order is displayed, including the MAR, "mark' that there is a drug-drug interaction ("Unresolved Drug Interaction'). This remains until the order is verified.

Allergy Checks:
  If a pharmacist and get an allergy check, for both PSO and PSJ, allow to enter intervention after the warning. If non-pharmacist and in UD or IV, print warning labels similar to drug- drug interaction functionality except the wording is "Potential Allergy". This is printed on profiles and

MARs, like above drug-drug interactions, and remains only until order is verified.

PSO non-pharmacist, labels print like significant and critical drug-drug interactions, except with wording "Potential Allergy". This should print on the allergy document of the label document.

IV Menu
[PSJI MGR]

This menu is the main starting point for the IV system. The new screen you see when access the IV Menu to process orders was designed using List Manager. For information on how List Manager is used please see page 3 of this manual.

Drug Inquiry (IV)
[PSJI DRUG INQUIRY]

By means of *Drug Inquiry (IV)*, pharmacists, and nurses on the wards will have pertinent information concerning IV additives and solutions at their fingertips. At the "Select PRINT NAME:" prompt, you can enter the print name, synonym, or quick code. If there is no information in the DRUG INFORMATION field of these files, you will see this message:

```
   *** No information on file. ***
------------------------------------------------------------------------
```

If there is information, the computer displays the date when the drug information was last updated, and the drug information on file for the additive or solution chosen. This information originates from a field called DRUG INFORMATION in both the IV ADDITIVES file (#52.6) and the IV SOLUTIONS file (#52.7). Data entered may include recommended diluent, concentration, rate of administration, stability, compatibility, precautions, cost, or other current drug information.

☞   **Note:** Drug Inquiry is allowed during order entry by entering two question marks (??) at the STRENGTH field of the "Select ADDITIVE" prompt.

Order Entry (IV)
[PSJI ORDER]

This option allows you to complete, edit, renew, and discontinue orders and to place existing orders on hold or on call. This option also allows you to create new orders and new labels. You can choose to view a long, to review all of the patient's recent IV orders, or you can bypass the profile by selecting NO Profile, and proceed directly to order entry. The profile is essentially the same as that generated by the *Profile* option. The long profile shows all orders, including discontinued and expired orders. The short profile omits the discontinued and expired orders.

Action on Previously Entered Order

If the patient has a profile with several orders, select the one requiring action. You can perform more than one action, but each action must be entered one at a time. Any action, which modifies an existing order, creates an entry in the Activity Log. To take no action, you can simply press the return key and go directly to the prompts to enter a new order. The following are the codes for the possible actions to existing orders.

DC – **Discontinue** the order. A pending order that is discontinued is automatically deleted from the system.

ED – **Edit** the order.

HD – Put the order on **Hold** or remove the order from hold status.

L – **Look** at the activity, label, and history logs.

OC – Put the order on **On Call** status or remove it from On Call status.

RN – **Renew** the order.

Entry of New Orders

To enter a new order, you must first select the type of order: admixture, piggyback, hyperal, syringe, or chemotherapy. Examples of prompts and possible responses for each type of order are provided in this chapter.

You will see order prompts for the following information when entering a new order. Entering a question mark at any of the prompts will give you additional information.

Additive field–There can be any number of additives for an order, including zero. You can enter an additive or additive synonym. If your IRM Chief/Site Manager or Application Coordinator has defined it in the IV ADDITIVES file, you may enter a quick code for an additive. The quick code allows you to pre-define certain fields, thus speeding up the order entry process.

    Note: Drug inquiry is allowed during order entry by entering two question marks (??) at the STRENGTH field of the "Select ADDITIVE:" prompt.

Solution–There can be any number of solutions in an order, depending on the type. It is even possible to require zero solutions when an additive is pre-mixed with a solution. If no solutions are chosen, the computer will give you a warning message, in case it is an oversight, and give you an opportunity to add one. You may enter an IV solution or IV solution synonym.

Infusion Rate– The infusion rate is the rate at which the IV is to be administered. This value, in conjunction with the total volume of the hyperal or the admixture type, is used to determine the time covered by one bag; hence the system can predict the bags needed during a specified time of coverage. This field is free text for piggybacks. For admixtures you must enter a number that will represent the infusion rate. You can also specify the # of bags per day that will be needed. Example: 125 = 125 ml/hr (IV system will calculate bags needed per day), 125@2 = 125 ml/hr with 2 labels per day, Titrate@1 = Titrate with 1 label per day. The format of this field is either a number only or <FREE TEXT > @ <NUMBER OF LABELS PER DAY > (e.g., Titrate @ 1).

Med Route– This is the route of administration for this medication (e.g., IV, SQ). If a corresponding abbreviation is found for this route in the MEDICATION ROUTES file, this module will print that abbreviation on its reports.

Schedule– This prompt occurs on piggyback and intermittent syringe orders. A schedule prompt is a request to queue doses on a recurring basis. For instance, a response to the schedule prompt may be **Q5H**, which would be a request to give doses every five hours. If you enter a non-standard schedule and non-standard administration times, the IV integrity checker will flag this field with a warning and give you an opportunity to re-edit.

> **Note:** It might be inappropriate for some orders with non-standard schedules to be given administration times. For example, the administration times for Q18H (every 18 hours) will vary.

Administration Time— This is free text. You might want to enter the times of dose administration using military time such as 03-09-15-21.

Start and Stop Dates / Times Prompts– The computer calculates the default start and stop date/times for order administration based on the DEFAULT START DATE CALCULATION field in the WARD PARAMETERS file. This field allows the site to use the next or closest administration or delivery time, or the order's login date/time as the default start date. This may be overridden by entering the desired date/times at the prompt. For continuous-type IV orders the default answer for the "START DATE/TIME" prompt is based on the delivery times for the IV room specified for that order entry session. For intermittent type IV orders this default is based on the administration times for the order. For the "STOP DATE/TIME" prompt, the default time is determined by the STOP TIME FOR ORDER site parameter. The default date shown is the least of (1) the <IV TYPE> GOOD FOR HOW MANY DAYS site parameter (where <IV TYPE> is LVPs, PBs, etc.), or (2) the NUMBER OF DAYS FOR IV ORDER field (found in the IV ADDITIVES file) for all additives in this order. These fields can be changed by your Site Manager or Application Coordinator.

Nature of Order– This specifies how the order originated. This prompt is only asked if the Inpatient Medications and the IV modules are *both* turned on for use in the OE/RR PARAMETERS file (#100.99).

> **Note:** While entering an order, you can quickly delete the order by typing an up-arrow (^) at any one of the prompts listed above except at the "STOP DATE/TIME" prompt. Once you pass this prompt, if you still want to delete the order, you can do so by typing an up-arrow (^) at the "Is this O.K." prompt.

Changing the Volume of a Solution

There are times when you will need to change the volume of the solution for one specific order. The syringe type of order does have a separate volume prompt so you won't have to add any steps. For other types, you can simply enter an order and then edit it to change the volume, or use the following method:

An order calls for 25 ML of D5W, but when you select D5W, there is no solution in the file with that volume. Choose the solution which is most like the one you need (e.g., D5W 50 ML). The system now thinks you want D5W 50 ML. At the next prompt, enter the characters **^SOL** and choose the solution you just entered. The next prompt is "SOLUTION: <DEFAULT> //". Enter the characters **^VOL** and you will be prompted "VOLUME: <DEFAULT> //". Change the volume for this specific order to the desired volume (the example below shows 25). The terminal dialog follows:

```
Select SOLUTION:    D5W      50ML
                                    [The system now thinks you want D5W 50
                                    ML.]
INFUSION  RATE:    ^SOL           [Go back to the Solution prompt.]
Select SOLUTION: D5W//<RET>       [Select the solution just entered.]
SOLUTION:  D5W //   <RET>         [Go to the Volume prompt.]
VOLUME:  50 ML //   25      ML    [Enter the desired volume for this order.]
```

Validate a New Order

After entering the data for the order, you will be asked to confirm that the order is correct The IV module contains an integrity checker to ensure the necessary fields are answered for each type of order. You must edit the order to make corrections if all of these fields are not answered correctly. If the order contains no errors, but has a warning, you will be allowed to proceed.

When the order is correct, if you have the Activity Ruler site parameter turned on, you will be shown a time line. The time line is a visual representation of the relationship between start of coverage times, doses due, and order start times. The letters **P**, **A**, **H**, **S** , or **C** show the start of coverage times for each type. If there is an

asterisk (*****) after the letter, this means that the Ward List has been run for this start of coverage type. The up-arrow (**^**) shows when the doses are due, and the **N** indicates current time in relation to the order. The next delivery time will also be listed. Example of a time line follows:

```
          3         6         9        12        15        18        21        24
..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:
          A *                                    A
                                       ^
                         N
*** Next delivery time is 1100 ***
```

Action on Labels

The *"Action (PBS)"* prompt will appear next, with all of the valid actions listed in parentheses. The following are the codes for the possible actions:

   P –   Print specified number of labels now.
   B –   Bypass any more action (entering an up-arrow (^) will also do this).
   S –   Suspend a specified number of labels for the IV room to print on demand.

The **S** will only appear as a valid action if the USE SUSPENSE FUNCTIONS site parameter is answered with **1** or **yes**. You can perform more than one action, but each action must be done one at a time. As each action is taken, those that operate on labels will reduce the total labels by that amount (e.g., eight labels are needed, three are suspended, then five are available to print).

Admixture Type

An admixture is a Large Volume Parenteral (LVP) solution intended for continuous parenteral infusion. It is composed of any number of additives (including zero) in one solution. An admixture runs continuously at a specified flow rate. When one bottle or bag is empty, another is hung.

The default answer for the "START DATE/TIME" prompt is the next or closest delivery time, or the order's login date/time, depending on the DEFAULT START DATE CALCULATION field in the WARD PARAMETERS file. The default date shown is the least of the LVP'S GOOD FOR HOW MANY DAYS: site parameter, or the NUMBER OF DAYS FOR IV ORDER field (found in the IV ADDITIVES file) for all additives in this order. You can choose to take the default answer for the Start and Stop Date/Times, or you can change it.

> **Note:** At the "START DATE/TIME" prompt, you can enter a future date/time. You will not be prompted for label actions at the end of order entry until that START DATE/TIME has been reached. The order will appear, however, on all reports.
>
> At the "STOP DATE/TIME" prompt, you can enter a DOSE limit (e.g., if you only want one bottle on the admixture order you are entering, enter a 1 at the stop time, and the program calculates the stop time). For example:

```
STOP DATE/TIME:  FEB 27,1992@2200 //  1  Dose limit..FEB 26,1992 10:00
```

Piggyback-Type Order Entry

A piggyback is a small volume parenteral solution used for intermittent infusion. It is usually composed of any number of additives, including zero, and one solution. The piggyback is given on a schedule (e.g., Q6H). Once the medication flows in, the piggyback is removed, and another is not hung until the administration schedule calls for it.

The default answer for the "START DATE/TIME" prompt is the next or closest admin time, or the order's login date/time, depending on now the default start date/time field is set in the Inpatient Ward Parameters file. For the "STOP DATE/TIME" prompt, the default time is determined by the STOP TIME FOR ORDER site parameter. The default date shown is the least of the PB'S GOOD FOR HOW MANY DAYS site parameter, or the NUMBER OF DAYS FOR IV ORDER field (found in the IV ADDITIVES file) for all additives in this order. You may choose to take the default answer for the Start and Stop Date/Times or you can change it.

Note: At the "START DATE/TIME" prompt, you can enter a future date/time. You will not be prompted for label actions at the end of order entry until that START DATE/TIME has been reached. The order will appear, however, on all reports.

At the "STOP DATE/TIME" prompt, you can enter a dose limit (i.e., if you only want four bags on the piggyback order you are entering, enter a **4** at the stop time) and the program calculates the stop date/time. For example:

```
STOP DATE/TIME:  MARCH 12,1994@2200 // 4   Dose limit   MAR 6,1994  03:00
```

Hyperal-Type Order Entry

Hyperalimentation (hyperal) is long-term feeding of a protein-carbohydrate solution. Electrolytes, fats, trace elements, and vitamins may be added. Since this solution generally provides all necessary nutrients, it is commonly referred to as Total Parenteral Nutrition (TPN. A hyperal is usually composed of many additives in two or more solutions (the hyperal must contain at least 1 solution). When the label prints, it shows the individual electrolytes that are contained in the additives that make up the hyperal order.

The default answer for the "START DATE/TIME" prompt is the next closest delivery time, or the order login date/time, depending on the DEFAULT START DATE CALCULATION field in the WARD PARAMETERS file. For the "STOP DATE/TIME:" prompt, the default time is determined by the "STOP TIME FOR ORDER:" site parameter. The default date shown is the LEAST of (1) the HYPERAL'S GOOD FOR HOW MANY DAYS: site parameter, or (2) the NUMBER OF DAYS FOR IV ORDER field (found in the IV ADDITIVES file) for all additives in this order. You can choose to accept the default answer for the Start and Stop Date/Times or you can change it.

At the "START DATE/TIME" prompt, you may enter a future date/time. You will not be prompted for label actions at the end of order entry until that Start Date/Time has been reached. The order will appear, however, on all reports.

At the "STOP DATE/TIME:" prompt, you can enter a dose limit (i.e., if you only want one bottle on the hyperal you are ordering, enter a **1** at the stop time) and the program will calculate the stop time. For example:

```
    STOP DATE/TIME:  FEB 27,1992@2200 //   1   Dose limit FEB 26,1992 10:00
```

If you enter additive quick codes, they will be handled like they are for an Admixture order.

Syringe-Type Order Entry

Once you enter the option and select the syringe-type order, you will be asked if the syringe is intermittent. If a syringe is continuous (not intermittent, you will follow the same order entry procedure as you would entering a hyperal or admixture order. If the syringe is intermittent, you will follow the same order entry procedure as a piggyback order.

On all syringe orders, a separate volume prompt appears during order entry to allow any necessary volume changes to the solution (if any) for the order. You should use caution during order entry of syringe types to ensure that the total volume for the syringe additive and solution is not greater than the total syringe volume. There is no "BOTTLE" prompt as in other order entry types, and a separate "SYRINGE SIZE" prompt appears during order entry to allow you to enter the syringe size for the order. All syringe sizes are printed on the labels.

If you use additive quick codes for an intermittent syringe order, they will be handled like they are for piggyback orders. If you use quick codes for a continuous syringe order, they will be handled like they are for admixture orders.

Chemotherapy-Type Order Entry

Chemotherapy is the treatment and prevention of cancer with chemical agents. A chemotherapy IV order can be one of three types: admixture, piggyback, or syringe. Once you enter the option and select chemotherapy as the type of order, you will be asked to further identify the order as admixture, piggyback, or syringe so that the computer will know what kind of questions to ask. Once the type is established, the prompts are the same as the examples for regular admixture, piggyback, and syringe. All chemotherapy orders have warnings on the labels.

Profile (IV)
[PSJI PROFILE]

This option shows all IV medications a patient has received during his most recent episode of care. You are allowed to view all information on file for any or all orders in the profile. Unlike the *Patient Profile (Unit Dose)* option, this option does not allow you to print a report. To do this, you must use the *Patient Profile Report (IV)* suboption under the *Reports (IV)* option

After you select the patient for whom you want to view a profile, you are asked to choose the length of the profile. You may choose to view a long or short profile or, if you decide not to view a profile for the chosen person, you can select NO profile to

return to the "Select PATIENT" prompt and choose a new name.

Each profile includes:

- Patient Name
- Patient Identification Number (PID)
- Weight & date/time of measurement
- Height & date/time of measurement
- Date of Birth
- Admitting Diagnosis
- Verified Drug Allergies and Adverse Reactions

  Note: Non-Verified and Verified drug allergies and adverse reactions are now displayed on the report header.

- Ward Location
- Admission Date

This is followed by the patient's orders. The long profile shows all orders, including canceled and expired orders, while the short profile omits canceled and expired orders. Orders are sorted first by status, with active orders listed first, followed by non-verified, pending, and non-active orders. Within each status, orders are displayed in order of entry, with the most recent order first.

The following information is displayed for each order:

> **Number**– You can choose a number at the left of the screen if you want to view detailed information about the orders(s), or to look at the activity log.

> **Additive**– The data listed under Additive includes strength of additive, type and volume of solution, and infusion rate or schedule.

> **Last fill**– The number of labels printed and the date and time of the last one printed.

> **Type of order**– Type will be **A** for admixture, **P** for piggyback, **H** for hyperal, **C** for chemotherapy, or **S** for syringe.

> **Start and stop dates**– The start and stop dates for this specific order

> **Status of the order**– (Column marked Stat) **A** for active, **P** for pending, **E** for expired, **D** for order discontinued, **O** for on call, and **H** for hold.

After the patient profile is displayed, you can choose one or more order numbers (e.g., 1, 3, 5) for a detailed view of the order(s) or, if you do not want to view an order, you can press the Return key.

The detailed view of the order presents all available data pertaining to the order, including patient identification and location, status of the order, additive(s) with strength, solution(s), infusion rate, medication route, the schedule, administration times, remarks, other print information, type of order, IV room, start and stop date and time, login date and time (when order was entered into the computer), date and time when last label was printed (Last Fill), and the number of labels printed (Quantity), entry code of person placing the order, health-care provider, provider comments, and the number of cumulative doses.

After you are shown the detailed view, you will be asked if you wish to see the activity log for the order. The activity log provides a trace of every action taken on an order since the original entry. The activity log contains a log number, the date and time of the activity, the type of activity (i.e., edit, renew, place on call, or discontinue an order), and the initials or entry code of the person entering the activity. The reason for activity comment allows you to explain why the activity was necessary. Also, you will be shown the field(s) which were affected, the original data contained in that field, and what it was changed to as a result of the activity.

You will also be asked if you wish to see the label log for the order. The label log contains a log number, date/time the label is printed, action on the prescription, user, number of labels printed, track (possible entries are individual, scheduled, suspended, order action labels, or other), and count (which indicates whether the label was counted for that particular day).

RETurns and Destroyed Entry (IV)
[PSJI RETURNS]

This option will allow you to enter the number of recycled, destroyed, and canceled IV bags per day in the IV room or satellite.

If a returned IV bag is no longer usable for any reason, it should be recorded as a destroyed IV bag. If a returned IV bag is reusable, it should be recorded as a recycled IV bag. If a label for an IV bag is printed but the IV bag is not made, then the IV bag should be recorded as a canceled IV bag.

All of the information needed to enter a returned, destroyed, or canceled IV into the computer is on the label of the IV bag. This information consists of patient name, ward location, and order number. It should be noted that the internal order number of the order is printed on the top left corner of the label in brackets [ ]. This number can be used to speed up the entry of returned and destroyed bags by skipping the patient profile and proceeding directly to the order view for that order number.

```
Internal Order Number ->  [1] 8983  1 NORTH  08/25/93
                          EISENHOWER,DWIGHT D.  160-4

                          Total Volume: 1044
                          ==============================
                          AMINOSYN 8.5% 500 ML
                          D 50 W 500 ML
                          SODIUM 40 MEQ
                          CHLORIDE 70 MEQ
                          POTASSIUM 43.33 MEQ
                          CALCIUM 4.6 MEQ
                          MAGNESIUM 4 MEQ
                          SULFATE 4 MEQ
                          ACETATE 2000 MG
                          PHOSPHATE 10 MM
                          MVI CONC 5 ML
                          ==============================

                          Dose due at: _____
                          125 ml/hr
                          2[3]
```

IOE Inpatient Order Entry
[PSJ OE]

This option allows you to complete, create, edit, renew, and discontinue IV and Unit Dose orders, as well as put existing IV and Unit Dose orders on hold or on call for any patient, while remaining in the IV module. This option expedites order entry since you are not required to change modules to enter IV and Unit Dose orders.

After you select the patient for whom you want to enter or modify orders, you can choose to view a long or short patient profile– to review the patient's recent IV or Unit Dose orders– or you can bypass the profile by selecting NO profile, and proceed directly to order entry. The profile is essentially the same as that generated by the *Inpatient Profile* option. The long profile shows all orders, including canceled and expired orders. The short profile does not show canceled or expired orders.

> **Note:** Non-Verified and Verified drug allergies and adverse reactions are now displayed on the profile header. If you choose to view a profile, you may
> select "A" at the "Select ACTION or ORDERS" prompt to see the list of all verified drug allergies and adverse reactions for the patient.

For IV order entry, you must bypass the "Select DRUG" prompt (by pressing the Return key) and then choose the IV type at the "Select IV TYPE:" prompt. Once you select the IV type, you can follow the same procedure as normal IV order entry as described in the IV Order Entry section. For Unit Dose order entry, you must reply at the "Select DRUG:" prompt. Once you choose the drug, you may follow the same procedure as Unit Dose order entry. You can enter orders for another patient by entering that patient's name at the "Select PATIENT" prompt.

IPF Inpatient Profile
[PSJ PR]

This option allows you to view the Unit Dose and IV orders of a patient simultaneously. You can conduct the Inpatient Profile search by patient, ward, or ward group. If you select to sort by ward, the administration teams may be specified. The default for the administration team is ALL and multiple teams may be entered. If selecting by ward or ward group, the profile may be sorted by patient name or room-bed.

When you access this option from the Unit Dose module for the first time within a session, you are first asked to select the IV room in which you wish to enter orders. You are then given the label and report devices defined for the IV room you choose. If no devices have been defined, you will be given the opportunity to edit them. If you exit this option and re-enter within the same session, you are shown your current label and report devices.

In the following description we will talk only about viewing a profile by patient, but ward and ward group are handled similarly.

After you select the patient for whom you need to view a profile, you are asked to choose the length of profile. You can choose to view a long or short profile or, if you decide not to view a profile for the chosen patient, you can select "NO profile" to return to the "Select PATIENT" prompt and choose a new name.

Once you choose the length of profile you wish to view, you can print the patient profile (by accepting the default or typing **P** at the "SHOW PROFILE only, EXPANDED VIEWS only, or BOTH? Profile//" prompt), an expanded view of the patient profile (by typing **E**), or both (by typing **B**). The expanded view lists the details of each order for the patient. If you choose to print the expanded view or both the expanded view and the profile, you can also print the activity logs of the orders.

The advantage of this option is that by viewing the combined UD/IV profile of a patient, you can quickly determine if any corrections or modifications need to be made for existing or future orders based on Unit Dose or IV medications already being received by the patient. Sometimes the pharmacist must revise a prospective order for a patient based on the Unit Dose or IV medications already prescribed for the patient.

> **Note:** For IV orders, the short and long activity logs give you the same results. However, for Unit Dose orders, the long activity log shows all activities of an order, while the short activity log excludes the field changes, and shows only the major activities. Verified and Non-verified drug allergies and adverse reactions are now displayed on the profile header.

Ward List (IV)
[PSJI WARD]

This option lists all active orders by patient within a ward. The module will predict how many doses are needed for a time period that you specify.

The *Ward List* option will calculate the number of doses due and when the doses are due for each active IV order. The Ward List **must** be run before the Manufacturing List, because the Manufacturing List is compiled from the Ward List or the updated Ward List (if updating is necessary). The standard sequence is to run a Ward List, send or take the list to the wards to compare against drugs on hand, update the Ward List from information gained on the ward, and then run the Manufacturing List. If a site chooses not to update the list, the Ward List must still be run.

When the Ward List is printed, the header on the sheet will show the Date of ward list, the Date and time of printing, Types (i.e., admixtures, piggybacks, hyperals, chemos, or syringes), Coverage time for each type, and Manufacturing time for each type

The coverage time shown gives you some important information. For each type you have chosen, the coverage time is listed. For example:

```
    PIGGYBACKS   covering from FEB 24,1993  12:00  to FEB 25,1993  02:59
```

Therefore, this Ward List will compile all active piggyback orders for the time frame between 12:00 noon and 02:59 a.m.

The Ward List will determine that a patient with a Q8H order, will need two doses for this coverage period (i.e., at 13:00 and 21:00).

```
        3         6         9         12        15        18        21        24
..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:
                                      ^                   ^
                                    13:00               21:00
```

If any new orders are entered into the system after the Ward List has been run, you will be instructed to print or suspend enough labels to get to the next coverage time since they were not included on this Ward List. For example, if a Q6H piggyback order was placed at 11:00 (administration times 01-07-13-19) and the Ward List shown above has been run, you will need labels for doses due at 1300, 1900, and 0100. The program will check to see if the Ward List has been run and prompt you to print or suspend three labels for those three doses.

The Ward List prints by ward and IV room, and within ward by type. It includes the patient name, room-bed, order information, stop date and time of the order, quantity needed, and the provider name.

Update Daily Ward List (IV)
[PSJI UP]

This option allows you to edit the doses to be manufactured for a specific patient and order number. It is not necessary to update the Ward List if the number of labels needed does not need to be modified. Using this option, you can change the number of labels needed, discontinue an order, renew it, or put it on hold. (Of course, any action on the order will be reflected in the Activity Log.) You can jump to any patient within a ward by using ^<PATIENT NAME> (^ alone means end this update).

The example shown is for a single ward. You can also choose to update a ward, outpatient IVs only (by entering ^OUTPATIENT), or all patients (by entering ^ALL). After the first view of the first patient on the ward, the ^<PATIENT NAME> feature was used in this example to get to the patient and order number desired. The Ward List indicates that two doses are needed. However, in this case an unadministered dose is still on the ward, so only one needs to be manufactured.

> **Note:** An asterisk (*) will appear after the number of labels if the original default value has been edited/changed. In this example, the next time this order is displayed the following prompt will appear. You must enter the appropriate number of labels to let the system know that you have acknowledged the change in the original default value.

```
#of labels 2*// 2          [You must enter a number, <RET> is not allowed
when an                    asterisk appears by the number]
```

Manufacturing List (IV)
[PSJI MAN]

This option produces a listing by additive and strength, or solution, of all orders due to be mixed at a scheduled manufacturing time. The option compiles the updated Ward List into a Manufacturing List to organize the IV room workload more efficiently. IVs are separated by drug (for intermittent orders) or solution (for continuous orders) to help you increase your productivity. The total number of admixtures, piggybacks, hyperals, chemotherapy, and syringes for each additive is shown, as well as how many belong to each patient.

The Ward List **must** be run before the Manufacturing List, because the Manufacturing List is compiled from the Ward List or the updated Ward List (if updating is necessary). The logical sequence is to run a Ward List, send or take the list to the wards to compare against drugs on hand, update the Ward List from information gained on the ward, and then run the Manufacturing List. If a site chooses not to update the Ward List, the Ward List must still be run.

> **Note:** If the Manufacturing List is run, the scheduled labels will be printed in the order of the Manufacturing List (grouped by drug). If it is not run, the scheduled labels will be printed in the order of the Ward List.

CRL Change Report/Label Devices (IV)
[PSJI DEVICE]

This option allows you to change the print output devices. When you first sign into the IV module the current default devices will be shown. This option *does not* change the default devices you have defined in the LABEL device or REPORT device site parameters, but will queue your report to the selected device.

This would be useful if you wish to print a short report to your screen. The new settings will remain unless you change them again or exit the system, at which time they will revert to the output devices defined in the site parameters.

CIR   Change to Another IV Room
[PSJI CHANGE]

This option allows you to change from one IV room to another. This option can be selected from the main IV Medications menu, which allows you to change IV rooms, without having to leave and reenter the IV module, when entering orders in different IV rooms. Once the new IV room has been selected, you are shown the current IV label and report devices as defined in the site parameters. However, if the IV label and/or report device has not been defined in the site parameters, you must select the IV label and/or report device for the output as shown below in the example.

Label Menu (IV)
[PSJI LBLMENU]

This option leads to the printing or reprinting of all scheduled or on-call orders. Orders suspended for a particular delivery time, however, cannot be printed from here, but must be printed from the suspense functions. This option contains four sub-options.

Align Labels (IV)
[PSJI ALIGNMENT]

This option allows you to align the labels on the Label printer. It will always print three test labels.

Individual Labels (IV)
[PSJI LBLI]

This option allows the printing of labels for a patient's order. You can choose whether or not the labels are to be counted as daily usage. This is often used for on-call orders or those not automatically delivered without a written request.

Scheduled Labels (IV)
[PSJI LBLS]

This option prints labels for a particular scheduled manufacturing time. Usually a Manufacturing List has been run prior to the printing of the labels. If this has been done, the labels will print immediately and in the same order as on the Manufacturing List (i.e., by drug [for intermittent orders] or solution [for continuous orders]). The use of this option also causes workload counts in the IV STATS file the first time they are printed. If they are printed a second time (e.g., due to a paper jam), the system knows they have been previously counted and will not count them in workload counts again. However, if the Ward List is re-run, and scheduled labels are printed again, the labels will be counted again in the workload.

Reprint Scheduled Labels (IV)
[PSJI LBLR]

This option allows scheduled labels to be reprinted in case of printer problems, or other occurrences, in which a portion of the scheduled labels failed to print. Labels printed with the reprint option will only be counted as usage if they were not counted during the original printing of scheduled labels.

Once a date has been selected, only manufacturing times for which scheduled labels have been attempted will be displayed for reprinting. You are then prompted for the patient's name(s) and the order number of the last and next usable labels. If **??** is entered at a prompt for order number, a profile will be displayed showing only orders for that patient which are on the current ward list. If no entry is made for the patient's name and order number on the "NEXT usable label" prompt, labels will be printed from the "LAST usable label" selected, to the end.

☞ **Note:** The Ward List (IV) and Scheduled Labels options MUST be run for the chosen date before you can use this option.

REPorts (IV)
[PSJI REPORTS]

This option leads to the selection of one of the preset reports of the IV module. This option contains five suboptions:

Active Order List (IV)
[PSJI ACTIVE]

This report will show all orders that are active at the time that this report is run. This report is similar to the Ward List, since the Ward List also contains all active orders when it is run; however this report

- Can be run at any time rather than only at a start of coverage time

- Will not affect the calculation of number of labels needed after order entry (Running the Ward List affects count of labels needed in label prompt, Action (PBS))

- Will contain all types of IV orders (hyperals, admixtures, piggybacks, chemos, and syringes)

- Can be run for specific ward(s)

☞ **Note:** At the "Start at WARD" or "Stop at WARD" prompts, you can enter ^OUTPATIENT to get reports for Outpatient IVs.

The IV module prints this report in alphabetical order. Therefore, you should carefully select your beginning and ending wards to make sure your beginning ward is alphabetically before the ending ward.

At the "Start at WARD" and "Stop at WARD" prompts, you can enter ward location number or synonym, or name of service. You can also enter ^OUTPATIENT for outpatient IV orders.

INpatient Stop Order Notices
[PSJ EXP]

The *INpatient Stop Order Notices* option produces a list of patients' medication orders which are about to expire. Action must be taken (using VA FORM 10-1158) if these medications are to be reordered. This option will list both Unit Dose orders and IV orders. You may choose to print ALL, which is the default, or either the UD or IV orders.

If you choose to print by ward, you may select to sort by multiple Admin teams, which is the default, or by one.

> **Note:** The special instructions field now prints on UD orders. Non-Verified and Verified drug allergies and adverse reactions are now displayed on the report header.

IV Drug Formulary Report (IV)
[PSJI DRUG FORM]

This report will allow you to print out all information on any of your defined IV drugs. It is a VA FileMan report, therefore you can choose to print out the fields of your choice.

Patient Profile Report (IV)
[PSJI PROFILE REPORT]

This option will allow a patient profile to be printed. With each profile printed, a view of each order within the profile can also be printed. Additionally, with each view you can choose to have the activity log and the label log printed.

Renewal List (IV)
[PSJI RNL]

This option prints a list of all orders which need to be renewed on the date you specify. These orders will expire on the given date if they are not renewed.

You will enter the beginning date and ending date of the renewal list. For example, if you want to know what orders will expire from noon today to noon tomorrow, enter T@1200 as the beginning date and T+1@1200 as the ending date.

> **Note:** At the "Start at WARD:" or "Stop at WARD:" prompts, you can enter ^OUTPATIENT to get reports for Outpatient IVs.

SUSpense Functions (IV)
[PSJI SUSMENU]

This menu will allow you to choose from the available *Suspense Functions* within the IV module. This option contains six suboptions

Delete Labels from Suspense (IV)
[PSJI SUSLBDEL]

This option allows you to delete labels for orders which have been placed on suspense. The order is not affected by this option, only the labels are deleted.

Individual Order Suspension (IV)
[PSJI INDIVIDUAL SUSPENSE]

This option allows you to suspend labels for a specific active order, you can only suspend ten labels at a time.

These labels will then be available for the IV room to release for doses due within the present coverage interval or for the next coverage interval if the Ward List for that batch has already been run.

Labels from Suspense (IV)
[PSJI SUSLBLS]

This option prints all labels that have been suspended since the last print of labels from suspense. Once labels have been printed, they are erased from this file and may not be printed again using this option. You can, however, use the *Reprint Labels from Suspense* option if the labels need to be reprinted.

Manufacturing Record for Suspense (IV)
[PSJI SUSMAN]

This option will compile all orders that are on suspense and print a Manufacturing List similar to the Manufacturing List under [PSJI MAN]. If your IV room fills a large number of IV orders from suspense, you might want to use this Manufacturing Record to help you organize this workload.

Reprint Labels from Suspense (IV)
[PSJI SUSREP]

This option will allow suspended labels that have been printed to be reprinted (e.g., if IV label printer was off line during initial printing). Each time labels are printed from suspense, they are assigned a batch number. When a batch of labels has to be reprinted, that batch number is entered and the labels reprinted. The default will always be the most recent batch number.

Suspense List (IV)
[PSJI SUSLIST]

Use this option if you want to view the future workload of orders that have been placed on suspense (to help you plan and organize your IV workload). This list can be viewed on your computer screen, or printed on the report printer device. Multiple printings of this list do not affect your suspense Manufacturing Record or suspense labels.

Glossary

Action Prompt   There are two types of "Action" prompts that
                                 occur during order entry. One type of requesting
                                 action on the order is the standard ListMan
                                 action prompt. The choices are listed in the
                                 footer of the ListMan screen. The following
                                 actions are valid:

PU	**Patient Record Updates**
DA	**Detailed Allergy/ADR List**
VP	**View Profile**
NO	**New Orders Entry**
IN	**Intervention Menu**
PI	**Patient Information**
SO	**Select Order**
DC	**Discontinue**
ED	**Edit**
VF	**Verify**
HD	**Hold**
RN	**Renew**
AL	**Activity Logs**
OC	**On Call**
+	**Next Screen**
-	**Previous Screen**
UP	**Up a Line**
DN	**Down a Line**
>	**Shift View to Right**
<	**Shift View to Left**
FS	**First screen**
LS	**Last Screen**
GO	**Go to Page**
RD	**Re Display Screen**
PS	**Print Screen**
PL	**Print List**
SL	**Search List**
Q	**Quit**

ADPL   **Auto Display (on/off)**
MAR   **MAR Menu**
LBL   **Label Patient/Report**
OTH   **Other Pharmacy Options**
JP   **Jump to a Patient**
CO   **Copy**

The second type of "Action" prompt, requesting action on labels, is "Action ( )", where the valid codes are again shown in the parentheses. The following codes are valid:

P   Print specified number of labels now.
B   Bypass any more action.
S   Suspend a specified number of labels for the IV room to print on demand.

Active Order   Any order which has not expired or been discontinued. Active orders also include any orders that are on hold or on call.

Activity Reason Log   The complete list of all activity related to a patient order. The log contains the action taken, the date of the action, and the user who took the action.

Activity Ruler   The activity ruler provides a visual representation of the relationship between manufacturing times, doses due, and order start times. The intent is to provide the on-the-floor user with a means of tracking activity in the IV room and determining when to cal for doses before the normal delivery. The activity ruler can be enabled or disabled under the *Site Parameter (IV)* option.

Administration Schedule File   File #51.1. This file contains administration schedule names and standard dosage administration times. The name is a common abbreviation for an administration schedule type (e.g., QID, Q4H, PRN). The administration time is entered in military time, with each time separated from the next by a dash, and times listed in ascending order.

Administering Teams   Nursing teams used in the administration of medication to the patients. There can be a number of teams assigned to take care of one ward, with specific rooms and beds assigned to each team.

Average Unit Drug Cost   The total drug cost divided by the total number of units of measurement.

CPRS   A **V***IST***A** computer software package called Computerized Patient Record Systems. CPRS is an application in **V***IST***A** that allows the user to enter all necessary orders for a patient in different packages from a single application. All non-verified orders that appear in the IV module are initially entered through the CPRS package.

Default Answer   The most common answer, predefined by the computer to save time and keystrokes for the user. The default answer appears before the two slash marks (//) and can be selected by the user by pressing the Return key.

Dispense Drug   The Dispense Drug name has the strength attached to it (e.g., Acetaminophen 325 mg). The name alone without a strength attached is the Orderable Item name.

Delivery Times   The time(s) when IV orders are delivered to the wards.

Dosage Ordered   After you have selected the drug during order entry, the dosage ordered field is asked next. You should only answer this field if the actual dosage or strength ordered is different from the available drug choices.

Hospital Supplied Self Med   Self med which is to be supplied by the Medical Center's pharmacy. Hospital supplied self med is only prompted for if the user answers Yes to the SELF MED prompt during order entry.

IV Room Name   The name identifying an IV distribution area.

Label Device   The device, identified by the user, on which computer-generated labels will be printed.

Medication Administering Team File   The Medication Administering Team file (#57.7) contains wards, the teams used in the administration of medication to that ward, and the rooms/beds assigned to that team.

Medication Instruction File   The Medication Instruction File (#51.2) is used by Unit Dose and Outpatient Pharmacy. It contains the medication instruction name, expansion and intended use.

Medication Routes File   File #51.2. contains medication route names. You can enter an abbreviation for each route to be used at your site. The abbreviation will most likely be the Latin abbreviation for the term.

Medication Routes/ Abbreviations   Route by which medication is administered (e.g., oral). The MEDICATION ROUTES file (#51.2) contains 51 pre-supplied routes. Abbreviations are selected by each VAMC. The abbreviation cannot be longer than five characters to fit on labels and the MAR. You can add new routes and abbreviations as appropriate.

Non-Formulary Drugs   Drugs that are not available for the use of all physicians.

Non-Verified Orders   Any order that has been entered in the Unit Dose module that has not been verified (made active) by a nurse and/or pharmacist. Ward staff may not verify a non-verified order.

Orderable Item   An Orderable Item name has no strength attached to it (e.g., Acetaminophen). The name with a strength attached to it is the Dispense drug name (e.g., Acetaminophen 325mg).

Order Sets
An Order Set is a set of N pre-written orders. N orders indicate that the number of orders in an Order Set is variable. Order Sets are used to expedite order entry for drugs that are dispensed to all patients in certain medical practices and procedures.

Order View
Computer option that allows the user to view detailed information related to one specific IV order of a patient. The order view provides basic patient information and identification of the order variables such as the additives, solutions, strength, bottles, start/stop dates, provider, IV type and room, entry code, last fill, schedule, administration times, infusion rate, other information and remarks, and number of cumulative doses.

Parenteral
Introduced by means other than by way of the digestive track.

Patient Profile
A listing of a patient's active and non-active IV orders. The patient profile also includes basic patient information, including the patient's name, social security number, date of birth, diagnosis, ward location, date of admission, reactions, and any pertinent remarks.

Pending Order
A pending order is one that has been entered by a clinician through CPRS without Pharmacy completing the order. Once Pharmacy has completed the order, it will become active.

Piggyback
Small volume parenteral solution for intermittent infusion. A piggyback is composed of any number of additives, including zero, and one solution; the mixture is made in a small bag. The piggyback is given on a schedule (e.g., Q6H). Once the medication flows in, the piggyback is removed; another is not hung until the administration schedule calls for it.

Pre-Exchange Units
The number of actual units required for an order until the next cart exchange.

Primary Solution   A solution, usually an LVP, administered as a vehicle for additive(s) or for the pharmacological effect of the solution itself. Infusion is generally continuous. An LVP or piggyback has only one solution (primary solution). A hyperal can have one or more solutions.

Profile   The patient profile shows a patient's orders. The Long profile includes all of a patient's order, sorted by status: active, non-verified, pending, and non-active. The Short profile will exclude the patient's canceled an expired orders.

Prompt   A point at which the computer questions the user and waits for a response.

Provider   Another term for the physician involved in the prescription of an IV or Unit Dose order for a patient.

Report Device   The device, identified by the user, on which computer-generated reports selected by the user will be printed.

Schedule (SCH)   The frequency of administration of a medication (e.g., QID, QD, QAM, STAT, Q4H).

Schedule Type (ST)   Codes include: **O** - one time (i.e., STAT - only once), **P** - PRN (as needed; no set administration times). **C**- continuous (given continuously for the life of the order; usually with set administration times). **R** - fill on request (used for items that are not automatically put in the cart - but are filled on the nurse's request. These can be multidose items (e.g., eye wash, kept for use by one patient and is filled on request when the supply is exhausted). And **OC** - on call (one time with no specific time to be given, i.e., 1/2 hour before surgery).

Self Med   Medication which is to be administered by the patient to himself.

Standard Schedule   Standard medication administration schedules stored in the ADMINISTRATION SCHEDULE

file (#51.1).

Status (STAT)
A - active, **E** - expired, **R** - renewed (or reinstated), **D** - discontinued, **H** - on hold, **I** - incomplete, or **N** - non-verified.

Stop Order Notices
A list of patient medications which are about to expire and may require action.

Units per Dose
The number of Units (tablets, capsules, etc.) to be dispensed as a Dose for an order. Fractional numbers will be accepted.

VA Drug Class Code
A drug classification system used by VA that separates drugs into different categories based upon their characteristics. IV cost reports can be run for VA Drug Class Codes.

Ward Group File
The WARD GROUP file (#57.7) contains the name of the ward group, and the wards included in that group. The grouping is necessary for the pick list to be run for specific carts and ward groups.

Ward Group Name
An arbitrarily chosen name used to group wards for the pick list and medication cart.

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